

COUNTY BOROUGH



OF HUDDERSFIELD.

ANNUAL REPORT

OF THE

Medical Officer of Health,

CHIEF SCHOOL MEDICAL OFFICER,
MEDICAL SUPERINTENDENT OF
HOSPITALS, CHIEF TUBERCULOSIS
OFFICER, AND MEDICAL OFFICER
TO THE MENTAL DEFICIENCY
COMMITTEE.

FOR THE YEAR

1937.

JOHN M. GIBSON, B.A., M.D., B.Ch., D.P.H.,
Fellow of the Society of Medical Officers of Health,
Fellow of the Royal Sanitary Institute, § § § §
Member of the British Medical Association, and §
President of the Yorkshire Branch, Society of Medical
Officers of Health.



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COUNTY BOROUGH OF HUDDERSFIELD.

Committees, 1937-38.

Health Committee :

Chairman : COUNCILLOR F. I. BUTTERWORTH, J.P.

Deputy Chairman : COUNCILLOR J. W. HIRST, M.A., M.R.C.S., L.R.C.P.

His Worship the Mayor (Alderman Alfred Willis, J.P.)

The Chairman of the Finance Committee (Councillor J. Barlow, J.P.)

Councillor A. Berry.

„ J. T. Bower.

„ J. Cantwell.

„ J. J. Crossley.

„ J. F. Gent.

Councillor J. W. B. Johnson.

„ J. H. Kahn, M.B., Ch.B.

„ A. H. Noble.

„ S. Oldroyd.

„ T. Wrigley.

Maternity and Child Welfare Committee :

Chairman : COUNCILLOR J. W. B. JOHNSON.

Deputy Chairman : COUNCILLOR T. WRIGLEY.

His Worship the Mayor (Alderman Alfred Willis, J.P.)

Councillor A. Berry.

„ F. I. Butterworth, J.P.

„ J. Cantwell.

„ J. W. Hirst, M.A., M.R.C.S., L.R.C.P.

„ J. H. Kahn, M.B., Ch.B.

„ A. H. Noble.

„ M. E. Sykes.

Mrs. M. Blamires, M.B.E., J.P.

Mrs. K. J. Broadbent.

Mrs. N. Mellor.

Miss M. Irving, J.P.

Mr. W. K. B. Broadbent, M.A.

Public Assistance Committee :

Chairman : COUNCILLOR J. W. B. JOHNSON.

Deputy Chairman : COUNCILLOR J. F. BEST.

His Worship the Mayor (Alderman Alfred Willis, J.P.)

The Chairman of the Finance Committee (Councillor J. Barlow, J.P.)

Councillor G. Armitage.

„ A. Berry.

„ J. T. Bower.

„ F. I. Butterworth, J.P.

„ J. Cantwell.

„ J. J. Crossley.

„ J. F. Gent.

Councillor J. R. Gregson.

„ H. Hale.

„ J. W. Hirst, M.A., M.R.C.S., L.R.C.P.

„ J. Lodge, J.P.

„ T. J. Moran.

„ A. H. Noble.

„ T. Wrigley.

Housing Committee :

Chairman : ALDERMAN J. E. LUNN.

Deputy Chairman : COUNCILLOR A. P. NICHOL, J.P.

His Worship the Mayor (Alderman Alfred Willis, J.P.)

The Chairman of the Finance Committee (Councillor J. Barlow, J.P.)

Alderman A. Gardiner, J.P.

„ W. T. Priest, J.P.

Councillor G. Armitage.

„ A. Berry.

„ L. Denham.

Councillor H. Hale.

„ J. W. Hirst, M.A., M.R.C.S., L.R.C.P.

„ L. Netherwood.

„ W. Scott.

„ M. E. Sykes.

Mental Deficiency Committee :

Chairman : COUNCILLOR J. W. HIRST, M.A., M.R.C.S., L.R.C.P.

Deputy Chairman : COUNCILLOR J. W. B. JOHNSON.

Alderman W. T. Joyce.

„ A. Sykes.

Councillor J. H. Kahn, M.B., Ch.B.

„ A. H. Noble.

Mrs. Lizette Beaumont.

Mrs. C. Laycock.

Mrs. John Pyrah.

Mrs. A. L. Sykes.

Mr. E. Smith.

Staff of the Public Health Department.

Medical Officer of Health, Chief School Medical Officer, Medical Superintendent of Hospitals, Chief Tuberculosis Officer, and Medical Officer to the Mental Deficiency Committee :

JOHN M. GIBSON, B.A., M.D., B.Ch., D.P.H.

Assistant Medical Officers of Health :

Miss Katherine A. Gill, M.B., B.S. (London), Senior Assistant.
Miss Marjorie Haynes, B.Sc., M.D., Ch.B.
Miss Dorothy B. Thomson, M.D., Ch.B.
Miss Edith E. Cromb, M.B., Ch.B., D.P.H.
Miss E. Clare Illingworth, M.B., Ch.B., M.R.C.S., L.R.C.P., B.Sc.

Assistant Tuberculosis Officer :

Ernest Firth, M.B., Ch.B.

Assistant School Medical Officers :

Miss Honora J. Twomey, M.D., Ch.B., D.P.H. (Left 30/4/37).
George A. W. Neill, M.D., B.Ch., D.P.H.
Miss Jenny D. Craig, M.B., Ch.B. (Commenced 1/7/37).

School Dentists :

Alexander B. Shields, L.D.S., R.F.P.S.
Cecil R. A. Airey, L.D.S. (Left 25/3/37).
John Stewart, L.D.S., R.F.P.S. (Commenced 29/4/37).

Mill Hill Isolation Hospital :

Miss Agnes P. Routledge, M.B., Ch.B.
*Miss E. White, Matron.

Bradley Wood Sanatorium :

Ernest Firth, M.B., Ch.B., Resident Medical Officer.
*Miss Maud L. G. Clark, Matron.

Municipal Maternity Home :

†*Miss I. Smith, Matron.

Children's Homes, Scholes (Transferred to West Riding County Council, 1/6/37) :

E. Trotter, M.B., Ch.B., M.R.C.S., L.R.C.P., Medical Officer.
Miss C. Smith, Matron.

Children's Home, Springwood Hall :

Miss E. A. Adam, Matron.

Sanitary Inspectors :

°§Ernest Richardson (Chief Inspector).
ab °§Dennis Drake.
b °§George Foster.
b °§William W. Townsend.
§James V. Goodall.
°||Wilfred Wiles.
°||Jack Beever (also part-time Assistant to Veterinary Officer).

Housing Inspectors :

ab °||Eric Drake.
°||Frank Ellam.

Temporary Assistant Housing Inspectors :

||John H. Raynor. (Left 13/4/37).
b °§Samuel E. Cousins-Mercer.
||Fred Owen. (Left 18/3/37).
||Victor N. Page. (Left 31/5/37).
°||Edward G. Pollard. (Left 7/8/37).
||David Coups. (Commenced 19/4/37).
||Pierce James Shannon. (Commenced 31/5/37).
||John Pester. (Commenced 31/5/37, left 31/7/37).
||Winston Horace Morgan Edwards. (Commenced 4/8/37).
||John Wade. (Commenced 9/8/37).

7 Temporary Junior Clerks—(Housing Act, 1930) :

Infectious Diseases Removal Officer :

Stanley Johnson.

Tuberculosis Nurse :

*Miss Catherine Vickers.

Infant Welfare Nurses and Infant Life Protection Visitors :

f†*Miss Beatrice E. Garrett. (Left 28/2/37).
fe†*Miss Marion Godley. (Left 23/1/37).
c†*Miss Susan Hegan. (Commenced 1/3/37).
†*Miss Ethel Unsworth. (Commenced 1/3/37).

School Nurses :

Miss Bessie Tomlinson.
 *Miss Maud Dalton.
 Miss Mabel E. Daniels.
*cd**Miss Sarah A. Maunder.

Clerical Staff :

Bernard Pilkington (Chief Clerk).
 Miss Alice Berry.
 Roland Burns.
 Horace C. Smith.
 Eric L. Darwin.
 Kenneth Holmes.
 Miss Annie Haigh.
 Miss Gladys M. Armitage (Temporary).
 Miss Joan E. Fleetwood (Temporary).
 Miss Marion Gaunt (School Medical Department).
 Miss Marjorie Hirst (do. do.).
 Miss Kathleen M. Sykes (do. do.).
 Miss Dorothy Ramsden (do. do.).
 Miss Alma J. Sleaf (do. do.).

Ophthalmic Consultant :

H. Tomlin, M.D., D.P.H.

Orthopædic Surgeon :

William Barclay, M.B., F.R.C.S. (Ed.)

Aural Consultant :

F. Gamm, M.C., M.B., Ch.B. (Commenced 29/10/37).

Veterinary Officer :

W. R. McKinna, M.R.C.V.S., D.V.S.M.

Public Analyst :

Henry T. Lea, M.Sc., F.I.C.

Vaccination Officer :

Ernest Firth.

District Medical Officers and Public Vaccinators :

C. Sheehy, M.B., B.Ch. (Died 3/2/37). R. J. Ogden, L.R.C.P.S.I.
 R. C. McIntosh, M.B., Ch.B. S. H. Waddy, F.R.F.P.S., L.R.C.P.S., L.D.S.
 J. J. Hanratty, M.B., Ch.B. S. Hall, M.B., Ch.B., B.A.O. (Added Area
 J. McCurdy, L.R.C.P.I. & L.M., L.R.C.S.I. & L.M. from 1/4/37).
 S. Prior, M.B., B.Ch. W. C. Cresdee, M.R.C.S., L.R.C.P.
 (Retired 30/6/37). (Commenced 13/12/37).
 E. C. H. Ewart, L.R.C.P.I. & L.M., L.R.C.S.I. & L.M. (Commenced 1/7/37).

Venereal Diseases Clinic :

Denton Guest, M.D. (Medical Officer).
 Frederick Reed (Orderly).

St. Luke's Hospital :

A. M. Affleck, M.D., Ch.B., M.R.C.P., Visiting Physician.
 Ronald G. Smithson, M.B., Ch.B., Resident Medical Officer (Left 30/6/37).
 Harold Kennedy, M.B., Ch.B., B.A.O., Resident Medical Officer
 (Commenced 15/7/37).

Consultant Obstetricians :

A. L. McCully, M.B., B.Ch., B.A.O. (Retired July, 1937).
 W. S. Dickson, M.D., B.Ch., M.A.O.
 W. D. Galloway, F.R.C.S.

Infant Life Protection and Boarding Out Visitor :

Mrs. Edith Cook.

* State Registered Nurse.

† Certificate of Central Midwives' Board.

§ Certificate of Royal Sanitary Institute.

|| Certificate of Sanitary Inspectors' Joint Board.

° Meat Certificate of Royal Sanitary Institute.

a Sanitary Science Certificate of Royal Sanitary Institute.

b Smoke Abatement Certificate of Royal Sanitary Institute.

c Fever Certificate.

d Member of College of Nursing.

e Qualified Queen's Nurse.

f Health Visitor's Certificate.

MISS C. SMITH.
 Died 10th May, 1938.

PUBLIC HEALTH DEPARTMENT,
HUDDERSFIELD,
JULY, 1938.

TO THE CHAIRMAN AND MEMBERS OF THE HEALTH COMMITTEE.

GENTLEMEN,

I have the honour to present to you the Annual Report for the year 1937 on the Public Health Services of the Borough, in accordance with Article 14 (3) of the Sanitary Officers' Order, 1926. The Report follows the lines indicated by the Ministry of Health in Circular 1650, dated October 4th, 1937. Again a number of Tables, not asked for in the Circular, are included in the Report, for the figures given in these show almost at a glance the changes which have occurred in matters relating to health over a period of years.

The year 1937 can be regarded as a satisfactory one from many points of view, for the statistics relating to employment, to the prevalence of infectious disease and to mortality rates were, on the whole, better than those recorded for several years past.

A widespread epidemic of Influenza, fulminating in type, occurred right at the beginning of the year, but the incidence of Pneumonia resulting therefrom was low and deaths attributable to it were few in number. The incidence of most other infectious diseases was exceptionally low, the decline in the prevalence of Diphtheria being particularly welcome. Statistics in the Report show that the incidence of this disease, that of Scarlet Fever, and that of Typhoid Fever, were all approximately one-half the rates for England and Wales as a whole.

Owing to the alarm occasioned of late by epidemics of Typhoid Fever, special notice will be taken this year, no doubt, of the fact that three cases of the disease occurred within the Borough. The presence of the disease is not, however, an unusual occurrence, for cases notified during each of the previous five years numbered 5, 3, 3, 4, and 4 respectively.

Freedom from epidemics over a number of years had given rise in some quarters to the belief that the Typhoid Group of diseases had been brought completely under control by the improved standards of hygiene and sanitation introduced and practised during the past fifty years. Experiences in several areas recently, however, have shaken that confidence and demonstrated that extensive outbreaks are still possible. Moreover, the occurrence of sporadic cases in the numbers stated above, year after year, is an indication that infection is always lurking somewhere in the vicinity, probably through the medium of carriers, and that the danger of an epidemic is one which must ever be guarded against.

The risk of spread of infection in diseases of this kind arises chiefly from the consumption of water and of milk, so that great care is necessary in the storage and handling of these to eliminate the possibility of contamination.

The supply of water for consumption locally is obtained from the moors in the immediate vicinity and, however carefully the collecting areas may have been guarded in the past, the invasion of country districts by hikers and motorists has now rendered complete

protection impossible. The Waterworks Committee have accepted, therefore, the recommendation that all supplies should be treated by chlorination—a process which when properly carried out renders the water safe for consumption without altering its taste. Up-to-date plant, of the type recently installed, carries this out continuously, accurately, and at comparatively little cost.

With regard to milk the position is more difficult, for a carrier employed on a farm, or in milk distribution, is not likely to be detected until a widespread epidemic has occurred. Protection can be guaranteed only by either efficient pasteurisation of all milk, or by sterilisation of the day's supply when received into the home. Treatment of this kind has the added value that it protects against Tuberculosis. In spite of all the attention paid to the inspection of cattle for many years past, the Report shows that of all the samples of milk taken for examination during the year 5.7 per cent. contained Tubercle Bacilli.

Of the mortality rates for the year, the most outstanding figures are those relating to Scarlet Fever and Whooping Cough, for no deaths from either of these diseases occurred during the year.

The maternal mortality rate was also exceptionally low—the lowest recorded in the Borough. It would be extremely rash for any one to say that the fall was attributable to the measures taken to ensure adequate ante-natal care and to provide safety at confinement, for the actual number of deaths in any one year is so small that considerable fluctuation in the mortality rate must be expected. At the same time a low rate is decidedly encouraging.

From the point of view of legislation the outstanding events of the year were the passing of the new Public Health Act and the coming into operation of the Midwives Act, 1936.

The new Public Health Act is the most comprehensive Act passed since that of 1875, but it does not introduce many new features, being more in the nature of a consolidation act than a new act; it brings together powers granted previously in several acts and throws light on matters which in the past have been subject to various interpretations.

The Midwives Act, on the other hand, has completely revolutionised the system of domiciliary midwifery practice, for it has introduced a staff of salaried midwives, who will gradually supplant the independent midwives. The change over has caused little disturbance locally, for the Queen Victoria Nurses' Association have undertaken to be responsible for all the domiciliary midwifery work required in the area. One of the practising midwives was given the benefit of the compensation payable to those retired compulsorily, three midwives retired voluntarily, and the remainder, twenty in number, remain for the time being in practice. As they gradually retire, the number of midwives employed by the Queen Victoria Nurses' Association will be increased according to requirements.

The wheels of municipal progress seem at times to revolve very slowly, particularly when building operations are involved, for the new Municipal Hospital, decided upon almost three years ago, has not yet reached the stage when tenders can be invited for its erection. In the meantime conditions at St. Luke's Hospital are far from satisfactory, for shortage of accommodation in certain sections gives rise at times to anxiety.

At the other hospitals under the control of the Corporation the extensions already approved are taking shape. Greatest progress has occurred at Mill Hill Isolation Hospital, where the erection of two new cubicle blocks and an extension of the Nurses' Home have added greatly to the facilities available both for patients and staff. At Bradley Wood Sanatorium an excellent Recreation Hall has been completed and a new up-to-date block for female patients is in course of erection. At the time of writing progress is also occurring in connection with the extension at the Municipal Maternity Home, where the rapidly increasing demand for admission has called for the provision of 25 additional beds, with the necessary increased staff accommodation.

With regard to housing, the slum clearance programme is proceeding just as rapidly as the erection of new houses, to receive the displaced tenants, will allow it to proceed. The Report shows that up to the end of the year, 1897 houses included in clearance areas, or treated as individual houses, had already been condemned, and it is anticipated that approximately twice as many more will have to be dealt with before the housing conditions of the area can be regarded as satisfactory. A few cases of overcrowding have been dealt with, but no definite scheme for the relief of the overcrowding, demonstrated by the Housing Survey carried out in 1936, has been undertaken. The Housing Committee did decide to erect 800 houses for this purpose, but as subsidy was available for houses erected for slum clearance purposes and not for the relief of overcrowding, the slum clearance programme had to receive prior consideration. The recent decision of the Government to allow the same grant for both purposes will now permit both schemes to proceed simultaneously and enable relief to be given to some families who are living at present under more unhealthy conditions than those associated with the so-called "slum" dwellings.

In submitting the Report I wish to place on record my indebtedness to the staff of the department, medical, nursing, and clerical, for another year's valuable and loyal service. The work of a Health Department is by no means static—it appears to be ever growing, bringing with its extension new responsibilities and increased duties. Its efficiency is not disturbed, however, by increased demands upon it if, like a piece of machinery, its wheels and the cogs thereof all work in harmony.

In concluding, I wish also to express my thanks to all members of the Council, and especially to the Chairmen and Vice-Chairmen of the Public Health, Maternity and Child Welfare, Housing, Public Assistance, and Mental Deficiency Committees for their support and encouragement in every phase of the work.

I have the honour to be, Gentlemen,

Your obedient servant,

John M. Gibson

GENERAL STATISTICS.

- 1.—**Situation of the Borough.**—Latitude varies from 53° 36' 40" N. to 53° 41' 40" N.; Longitude varies from 1° 42' 59" W. to 1° 53' 40" W.
- 2.—**Elevation.**—Varies from 150 feet to 1,200 feet above Sea Level.
- 3.—**Area of the Borough.**—14,149 acres.
- 4.—**Population.**—1931 Census, 113,475; estimated by the Registrar-General at middle of 1937, 123,030; modified estimate specially designed for use with the composite records of births, deaths and notifiable diseases of the year 1937, 121,173.
Borough Boundary altered 1st April, 1937 and 1st April, 1938.
- 5.—**Density of Population.**—For the Borough 8.7 persons per acre.
- 6.—**Number of Inhabited Houses (1931)** 31,650
- 7.—**Number of Inhabited Houses (end of 1937)** according to
Rate Books 41,051
- 8.—**Number of Families or Separate Occupiers (Census 1931)** 32,109
- 9.—**Rateable Value of the Borough**—£935,925.
- 10.—**Sum represented by 1d. Rate.**—£3,557.

CHIEF OCCUPATIONS AND SOCIAL CONDITIONS.

Throughout the year employment and trade conditions generally were more satisfactory than they have been for some years past. The improvement recorded in the years 1935 and 1936 was continued and well maintained throughout the year. This is demonstrated by the following figures :—

		Totally unemployed	Temporarily suspended or working short time	Total
January, 1935	...	3,566	3,900	7,466
January, 1936	...	2,211	1,080	3,291
January, 1937	...	1,652	1,071	2,723
April, 1937	...	1,630	951	2,581
July, 1937	...	1,696	2,148	3,844
October, 1937	...	1,681	1,077	2,758

With such increased activity affecting practically all trades, it was surprising to find that the number of totally unemployed remained as high as 1,681. One fears that amongst this number there must be a large proportion of what can only be called unemployables—men who through years of idleness have become so indifferent and so physically unfit that they have neither the desire nor the capacity to undertake any work which necessitates some degree of physical exertion.

It is a matter of great regret that the excellent improvement in trading conditions recorded above, as illustrated by the unemployment figures, were not maintained during the present year. The set back is demonstrated by the figures for April, which were as follows :—

	Totally unemployed	Temporarily suspended or working short time	Total
	2,481	4,079	6,560

The chief local industries given in order corresponding to the greatest number of persons employed in each are as follows :—

- (1) Woollen industries.
- (2) Commercial occupations.
- (3) Metal trades.
- (4) Transport occupations.
- (5) Clerical occupations.
- (6) Building trades (including quarrying).
- (7) Engineering trades.
- (8) Agricultural occupations.
- (9) Chemical trades.

Below are shown the chief occupations and the number of deaths which have occurred during the past five years amongst the employees in the various groups. For some years past death-rates have been given in the Annual Report, but for the past year this practice cannot be continued on account of the extension of the Borough, which has added an unknown number of employees to each group.

Occupation				Deaths in				
				1933	1934	1935	1936	1937
Metal Workers	...	...	...	13	9	18	9	22
Clerks, Typists & Draughts-								
men	...	...	...	19	14	11	10	12
Commercial Occupations	...	...	...	72	93	94	91	98
Textile Workers	...	...	...	148	124	139	115	126
Transport Workers	...	...	...	29	29	29	39	25
Building Trades (includes								
Quarry Workers)	...	...	...	39	29	48	31	55
Agricultural Workers	...	...	...	8	9	12	6	6
Chemical Workers	...	...	...	25	5	7	1	2
Household Duties (includes								
Housewives, Domestics,								
etc.)	...	...	...		
Retired or not Gainfully	...	...	...	1193	1087	1139	1240	1279
Occupied	...	...	...		
Too young for occupation	...	...	...		
Engineering Trades	...	...	...	56	30	17	28	32
Unspecified Trades	...	...	...	109	110	83	81	67

The highest percentage increase in deaths last year, compared with the previous year, occurred amongst metal workers, but actually the death-rate even at this higher figure is still below the average. Probably the most important increase was that which occurred amongst quarry workers and those engaged in the building trades. As mentioned in the previous Report, there is reason to believe that the silica dust to which such workers are exposed exercises a deleterious effect upon their lungs, leading in many cases to Silicosis, and in all probability the increased number of deaths, in this group of workers, recorded above, is a reflection of the great activity which has prevailed in the building trade during recent years.

EXTRACTS FROM VITAL STATISTICS OF THE YEAR.**Live Births during 1937.**

			Males	Females	Total
Legitimate	...	...	757	709	1,466
Illegitimate	...	...	35	42	77
					<hr/> 1,543
Birth-rate per 1,000 of the estimated resident population—					12.78

Still Births.

			Males	Females	Total
Legitimate	...	...	41	33	74
Illegitimate	...	...	3	3	6
					<hr/> 80

Rate per 1,000 total (live and still) births—49.29.

Deaths.

Males	Females	Total
839	885	1,724

Death-rate per 1,000 of the estimated resident population—**14.28**

Deaths from puerperal causes (headings 29 and 30 of the Registrar General's Short List)—

	Deaths.	Rate per 1,000 total (live and still) births.
No. 29 Puerperal Sepsis ...	1	0.62
No. 30 Other Puerperal Causes ...	1	0.62
Total ...	<hr/> 2	<hr/> 1.23

Death-rate of Infants under One Year of Age.

All infants per 1,000 live births ...	61
Legitimate infants per 1,000 legitimate live births ...	57
Illegitimate infants per 1,000 illegitimate live births ...	143

Deaths from Cancer (all ages) ...	225	Rate 1.86
Deaths from Measles (all ages) ...	3	„ 0.02
Deaths from Whooping Cough (all ages) ...	—	„ 0.00
Deaths from Diarrhoea (under two years of age) 2		„ 0.02

LOCAL STATISTICS.

The Registrar-General's estimate of the population for the year 1936 was 115,300. Allowing for the natural increase in the population and for the increase brought about by the extension of the Borough, the estimate for the middle of 1937 was 123,030, being an increase of 7,730. The extension of the Borough did not take place, however, till April, and as the rates were based on a smaller population for the first three months of the year than on the remaining nine months, the Registrar-General has submitted a modified estimate, specially designed for use with the composite records of births, deaths and notifiable infectious diseases for the year. This estimate is 121,173.

Table I. shows the vital statistics of the area since the year 1911. Although the birth-rate has increased slightly during the past two years, the death-rate has also been higher, and since the year 1930 the latter has been consistently higher than the former.

Table II. gives a comparison between the local birth and death rates with the average rates for other towns and for the country generally. The death-rate is again higher and the birth-rate lower than the average.

From the point of view of infectious diseases, it will be seen that the local death-rates from these compare favourably with the averages given. There were no deaths from Scarlet Fever, nor from Whooping Cough, and the death-rate from Diphtheria locally was lower than the average for the first time for several years.

The infantile mortality figure (61) was above the average for England and Wales, but just below the average rate for the County Boroughs and Great Towns.

Table III. shows the distribution of infant deaths in the various districts of the Borough throughout the year. The Central area again gave the highest number of fatalities, whilst the death-rate which was highest in the first quarter of the year, particularly in March, gradually declined towards the end of the year.

Table IV. refers to the deaths of infants under one year of age. It will be observed that by far the greatest number of deaths occurred from Prematurity. It is of interest to point out that the number of deaths which occurred in the first week of life exceeded the total of those in the remaining fifty-one weeks of the first year. For four years in succession this rather surprising distribution of deaths has been noted—a distribution which shows that more than fifty per cent. of the infantile deaths cannot be prevented by post-natal care, for they have obviously resulted from causes which must have developed either prior to, or as a result of injury at, the time of delivery.

Table V. gives the causes of all the deaths which occurred during the year and their distribution over the various age groups. The Table gives much useful information, but is rather unwieldy for quick reference. The following figures are given therefore to indicate more precisely the deaths which were caused by the chief death-producing diseases and to show how these compared with the corresponding figures for the previous year:—

CAUSE OF DEATH				1937	1936
Heart Disease	...	...	...	384	295
Cancer	...	...	...	225	211
Other Circulatory Diseases			...	153	191
Cerebral Hæmorrhage, etc.			...	107	93
Acute and Chronic Nephritis			...	99	85
Bronchitis	...	...	...	83	96
Pneumonia	...	...	...	82	105
Congenital Debility, Premature Birth, Malformations, &c.	...	...	...	72	58
Senility	...	...	...	64	94
Pulmonary Tuberculosis	...	...	...	61	54
Influenza	...	...	...	59	16

As in previous years “Heart Disease” heads the list of the “Captains of Death” and appears to be claiming an increasing number of victims. As explained in the previous year’s Report, this is not an indication, however, that the rush and strain of modern life are showing their effects upon what is undoubtedly the hardest worked organ of the body. However well we may ward off infectious disease, or protect the body from injury, it is allotted to all men once to die, and a large proportion of deaths attributed to “Heart Disease” might more correctly be attributed to “Senility.” The proportion of persons reaching the stage of life described by the younger generation as “old age” is steadily increasing. With the

passing years comes a gradual hardening of the walls of the blood vessels, thereby causing increasing strain upon the mechanism of the heart. It is not surprising, therefore, to find that deaths from such causes as "Myocardial Degeneration" and "Cerebral Hæmorrhage" are steadily rising.

It is possible that increased longevity may account to some extent for the larger number of deaths caused by Cancer which we find recorded year by year, but the increase is too great to be explained by that alone. An immense amount of research work has been devoted to this subject during the past decade and in consequence better results in the matter of treatment are now obtainable and certain types of Cancer, which were closely associated with particular occupations, can now be either prevented or greatly diminished. At the same time it must be admitted that no satisfactory explanation can yet be given as to why this disease, in spite of all the precautions taken to guard against it, is steadily increasing.

Table VII. shows the distribution over the wards of the Borough of all the births and deaths recorded. It will be observed that again last year, as in the previous year, deaths from Tuberculosis in the Central ward were more than double those which occurred in any other ward. Whilst the population of this ward is greater than that of any of the others, the difference is not great, so there must have been some adverse factors in operation to account for such a marked variation. Overcrowding and unsatisfactory housing conditions are undoubtedly the chief of these, for their action in intensifying both the incidence and the death-rate from Tuberculosis are well recognised, whilst the housing survey demonstrated that the prevalence of both was greatest in the Central area. It will be interesting to note in the future the effect upon figures such as these of the programme now in progress for slum clearance and the relief of overcrowding.

Table VIII. must be one of the most interesting Tables given in the Report, for it demonstrates, most clearly, the influence of Public Health work since the beginning of the century upon the vital statistics of the area. In every column the falls in death-rates recorded are most substantial. One of the most outstanding results is the fall in the death-rate amongst children aged one to five years. It will be observed that for last year this rate was approximately one-eighth the corresponding rate for the year 1901. At the other extreme of life we find deaths of persons sixty-five years of age and upwards are steadily increasing. The figures show how the death-rates for respiratory diseases and for all the zymotic diseases have gradually been reduced, whilst deaths from violence and accidents have remained more or less stationary. As a result of the many precautions required by the Factory Acts to ensure the safety of workers, accidents in mills, workshops and factories have been greatly reduced, but this reduction has been neutralised by the increased dangers of modern, high-speed, motor transport.

Table IX. gives the chief vital statistics for all the County Boroughs within easy reach from Huddersfield. It will be observed that the local rates shown compare on the whole favourably with those of the other areas. It is of interest to note that in 8 out of the 14 areas the death-rate was higher than the birth-rate. Although the local infantile mortality rate last year was above the average of recent years this Table shows that only 4 of the surrounding County Boroughs had a lower rate, whilst the maternal mortality figure for Huddersfield was well below the average of the surrounding areas.

TABLE I.
Vital Statistics of Huddersfield during the Year 1937, and previous Years.

YEAR.	Population estimated to middle of each year.	BIRTHS.			Total Deaths registered in the District.		Transferable Deaths.		Nett Deaths belonging to the District.			
		Un- corrected Number.	Nett.		Number.	Rate.	of Non- residents registered in the District. 8	of Resi- dents not registered in the District. 9	Under 1 Year of Age.		At all Ages.	
			Number.	Rate.					Number.	Rate per 1,000 nett Births. 11	Number.	Rate.
1	2	3	4	5	6	7	8	9	10	11	12	13
1911	108144	2126	2122	19.69	1664	15.44	84	55	281	132	1635	15.17
1912	109512	2060	2056	18.84	1540	14.11	94	61	199	97	1507	13.81
1913	110882	2196	2196	19.50	1681	14.92	101	84	227	103	1664	14.77
1914	112265	2030	2030	18.08	1690	15.05	104	63	227	112	1649	14.69
1915	112265	1940	1935	17.29	1796	16.05	90	124	212	109	1830	16.35
1916	115390	1905	1906	17.20	1747	15.71	156	83	198	103	1674	15.11
1917	107969	1646	1650	15.29	1475	13.29	123	79	132	80	1431	13.29
1918	105818	1575	1575	13.35	1737	16.41	105	130	158	100	1762	16.65
1919	105346	1519	1519	12.66	1701	15.81	107	98	144	95	1692	15.81
1920	112301	2106	2102	18.02	1546	13.81	111	62	169	80	1497	13.37
1921	116776	2040	2049	17.60	1607	13.80	126	70	178	87	1481	12.72
1922	111900	1837	1827	16.38	1503	13.47	101	67	137	74	1469	13.17
1923	111600	1752	1752	15.75	1459	13.11	115	60	126	72	1404	12.62
1924	111800	1666	1627	14.32	1625	14.31	102	64	159	97	1587	13.97
1925	112000	1660	1631	14.61	1576	14.11	160	78	112	69	1494	13.38
1926	111900	1617	1559	13.98	1494	13.19	126	56	90	58	1424	12.77
1927	112100	1609	1574	14.09	1685	15.08	135	117	117	74	1667	14.92
1928	113000	1573	1537	13.65	1543	13.70	150	102	102	66	1495	13.27
1929	113100	1536	1439	12.77	1742	15.45	150	96	114	79	1688	14.98
1930	113100	1669	1531	13.33	1622	14.12	170	75	85	56	1527	13.29
1931	114300	1535	1398	12.27	1639	14.39	159	90	86	62	1570	13.78
1932	114000	1505	1335	11.75	1547	13.62	175	75	70	52	1447	12.74
1933	114000	1510	1297	11.42	1842	16.21	216	85	64	49	1711	15.06
1934	114500	1673	1435	12.58	1683	14.75	223	79	84	59	1539	13.49
1935	115000	1705	1397	12.19	1750	15.27	231	78	63	45	1597	13.93
1936	115300	1802	1441	12.30	1788	15.27	201	64	91	63	1651	14.10

TABLE II.
Birth-rates, Death-rates, and Analysis of Mortality in the Year 1937.
England and Wales, 125 County Boroughs and Great Towns, and 148 Smaller Towns.

Provisional figures based on Weekly and Quarterly Returns.

	RATES PER 1,000 POPULATION.		ANNUAL DEATH-RATE PER 1,000 POPULATION.									RATES PER 1,000 LIVE BIRTHS.	
	Live Births.	Still-births.	All Causes.	Typhoid and Paratyphoid Fevers.	Small Pox.	Measles.	Scarlet Fever.	Whooping-cough.	Diphtheria.	Influenza.	Violence.	Diarrhoea and Enteritis (under 2 Years).	Total Deaths under One Year.
England and Wales.....	14.9	0.60	12.4	0.00	—	0.02	0.01	0.04	0.07	0.45	0.54	5.8	58
125 County Boroughs and Great Towns, including London ..	14.9	0.67	12.5	0.01	—	0.03	0.01	0.04	0.08	0.39	0.45	7.9	62
148 Smaller Towns— (Resident Populations 25,000 to 50,000 at 1931 Census) ..	15.3	0.64	11.9	0.00	—	0.02	0.01	0.03	0.05	0.42	0.42	3.2	55
London Administrative County	13.3	0.54	12.3	0.00	—	0.01	0.01	0.06	0.05	0.38	0.51	12.0	60
Huddersfield	12.8	0.66	14.3	0.01	—	0.02	0.00	0.00	0.03	0.49	0.50	1.3	61

TABLE III.

Deaths of Infants under One Year of Age during the Year 1937.
Monthly, Quarterly, and Ward Distribution.

Month	Central	Dalton	Almond-bury	Lockwood	Lindley	Moldgreen	Milns-bridge	Month	Total Quarter	Total Year	
January ...	3	2	—	1	—	—	—	6}	32 { 26 { 19 { 17	94	
February ...	2	2	1	—	3	1	—	9}			
March ...	3	3	4	4	2	1	—	17}			
April...	1	2	—	1	—	2	1	7}			
May ...	3	1	1	2	1	—	1	9}	19		
June...	4	3	—	—	1	1	1	10}			
July...	4	—	—	—	—	—	—	4}			
August ...	—	1	1	—	2	1	1	6}	17		
September ...	2	4	1	1	1	—	—	9}			
October ...	3	—	2	1	—	—	—	6}			
November ...	—	1	—	—	1	—	—	2}	94		
December ...	2	3	—	3	1	—	—	9}			
Total Year	27	22	10	13	12	6	4	94	94	94	

TABLE IV.

Infant Mortality during the Year 1937.

Nett Deaths from stated causes at various ages under One Year of Age.

CAUSE OF DEATH.	Under										Total Deaths under 1 Year.
	1 week.	1 and under 2 weeks.	2 and under 3 weeks.	3 and under 4 weeks.	Total Deaths under 4 weeks.	4 weeks and under 3 months.	3 months and under 6 months.	6 months and under 9 months.	9 months and under 12 months.	Total Deaths 4 weeks to 12 months.	
Small Pox
Chicken Pox
Enteric Fever
Measles
Scarlet Fever
Whooping Cough
Diphtheria
Influenza
Cerebro-Spinal Fever
Tuberculosis of Respiratory System
Other Tuberculous Diseases
Syphilis
Cerebral Hemorrhage
Heart Disease
Bronchitis
Pneumonia (all forms)
Other Respiratory Diseases
Diarrhoea
Other Digestive Diseases
Acute and Chronic Nephritis
Congenital Malformations—
(a) Congenital hydrocephalus
(b) Spina bifida and meningocele
(c) Congenital malformation of heart
(d) Monstrosities
(e) Other congenital malformations—
1. Congenital Pyloric Stenosis
2. Cleft Palate, Harelip
3. Imperforate Anus
4. Other stated congenital malformations
5. Congenital malformation, unspecified
Congenital debility
Premature birth
Injury at birth
Other diseases peculiar to early infancy—
(a) Atelectasis
(b) Icterus Neonatorum
(c) Other diseases—
1. Diseases of the umbilicus
2. Pemphigus Neonatorum
3. Other diseases
Other causes—
(a) Erysipelas
(b) Rickets
(c) Meningitis
(d) Convulsions
(e) Suffocation, overlying
(f) Diseases of the skin
(g) Inattention at birth
TOTALS	54	5	7	3	69	10	7	3	5	25	94

Nett Births in period—
Legitimate
Illegitimate1,466
77Nett Deaths in period—
Legitimate Infants
Illegitimate Infants83
11

Infant Mortality Figure.

All Infants per 1,000 live births
 Legitimate Infants per 1,000 legitimate live births
 Illegitimate Infants per 1,000 illegitimate live births

61
57
143

TABLE V.

[illegible]

TABLE VI.
CANCER DEATHS.

LOCALISATION OF DISEASE.	All Ages		Under 1		1-2		2-3		3-4		4-5		5-15		15-25		25-45		45-65		65-75		75 and upwards.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Cancer of—																								
Buccal cavity and pharynx ...	13	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	6	—	5	1	2	1
Digestive organs and peritoneum :																								
(a) Esophagus ...	9	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—	6	—	—	—
(b) Stomach and duodenum ...	18	18	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	9	11	8	3	1	—
(c) Rectum ...	11	4	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	6	1	4	—	—	—
(d) Liver and biliary passages	7	6	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	3	3	1	2	2
(e) Pancreas ...	4	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	1	1	—
(f) Peritoneum ...	1	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
(g) Other digestive organs	22	23	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	11	7	7	—	1	7
Respiratory organs ...	7	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	4	1	2	1	—	—
Uterus ...	—	18	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	4
Other female genital organs	—	4	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Breast ...	—	25	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Male genito-urinary organs	14	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	6	12	4	8	2	3
Skin ...	2	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1	1	—
Other or unspecified organs	5	7	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	3	2	1	3	1	1
Totals ...	113	112	—	—	—	—	—	—	1	—	—	—	—	—	1	1	8	8	51	49	41	31	11	23
NOTE.																								
Cases in which cancer of the bladder was mentioned ...	9	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	3	—	3	3	2	—

TABLE VII.

Return of Births and Deaths Registered during the fifty-two weeks ended January 1st, 1938.

TOWNSHIPS	BIRTHS REGISTERED during the 52 weeks ended January 1st, 1938.		DEATHS REGISTERED during the 52 weeks ended January 1st, 1938.		AGE MORTALITY.			SEVEN ZYMOTIC DISEASES.							Tuberculosis (all Forms)	Bronchitis, Pneumonia and other Respiratory Diseases	Heart Diseases.	Cancer	All other Diseases.
	Births Registered during the 52 weeks ended January 1st, 1938.	Deaths Registered during the 52 weeks ended January 1st, 1938.	Under 1 year.	Over 1 and under 5 years.	Persons aged 65 years and upwards.	Small Pox.	Measles	Scarlet Fever.	Diphtheria.	Whooping Cough.	Enteric Fever.	Diarrhoea.							
CENTRAL (includes North Central, South Central, West Central and Paddock)	292	367	27	7	167	1	1	1	1	1	1	1	28	41	79	39	177		
DALTON (includes Dalton, Deighton and Bradley, Birkby and Fartown)	318	329	22	3	168	1	1	1	1	1	1	1	11	40	61	44	171		
ALMONDBURY (includes Almondbury and Newsome)	237	246	10	3	125	1	1	2	1	1	1	1	7	26	66	38	106		
LOCKWOOD (includes Lockwood and Grosland Moor)	254	252	13	3	130	1	1	1	1	1	1	1	4	28	51	35	134		
LINDLEY (includes Lindley, Longwood and Marsh)	218	313	12	2	179	1	1	1	1	1	1	1	13	27	84	41	146		
MOLDGREEN	156	157	6	1	97	1	1	1	1	1	1	1	7	21	33	19	77		
MILNSBRIDGE	68	60	4	1	35	1	1	1	1	1	1	1	2	6	10	9	33		
Royal Infirmary	103	199	18	10	44	1	1	1	1	1	1	1	3	23	9	31	129		
Green Lea Annexe	2	18	1	1	10	1	1	1	1	1	1	1	1	1	1	1	16		
Nursing Homes	23	20	1	1	10	1	1	1	1	1	1	1	1	1	3	7	9		
Maternity Home	475	40	40	1	1	1	1	1	1	1	1	1	1	1	1	1	39		
Bradley Wood Sanatorium	15	15	1	1	1	1	1	1	1	1	1	1	14	1	1	1	3		
Mill Hill Isolation Hospital	31	31	1	1	3	1	1	3	1	1	1	1	24	1	1	1	120		
St. Luke's Hospital	126	236	11	3	155	1	1	1	1	1	1	1	3	33	53	27	120		
Other Births and Deaths of Huddersfield Residents occurring outside the Borough	25	85	3	1	26	1	1	1	1	1	1	1	3	8	18	6	50		
Borough	1543	1724	94	19	901	3	1	4	1	1	1	2	72	189	384	225	844		

NOTE.—In this Table the Births and Deaths in Institutions, and “Other Births and Deaths of Huddersfield Residents occurring outside the Borough,” are classified to the districts to which they belonged.

TABLE VIII.

The figures given denote the Death-Rates per 1,000 per annum.

YEAR.	Estimated Population at the middle of the Year.	From all causes and at all ages.	Children under 1 year.	Children over 1 year and under 5 years.	In persons aged 65 years and upwards.	ZYMOTIC DISEASES.							Seven Zymotic Diseases.	Violence and Accidents.	Respiratory System Diseases.
						Small Pox.	Measles.	Scarlet Fever.	Diphtheria.	Whooping Cough.	Typhoid Fever.	Diarrhoea.			
1901	95,351	16.64	3.02	1.23	4.38	0.00	0.14	0.06	0.06	0.02	0.19	0.94	1.41	0.61	4.46
1921	116,776	12.72	1.52	0.49	3.14	0.00	0.01	0.01	0.09	0.06	0.03	0.12	0.34	0.39	3.16
1931	114,300	13.78	0.75	0.30	6.38	0.00	0.09	0.01	0.04	0.02	0.00	0.01	0.17	0.54	2.66
1932	114,000	12.74	0.62	0.22	6.13	0.00	0.01	0.01	0.02	0.04	0.01	0.03	0.11	0.56	2.17
1933	114,000	15.06	0.56	0.39	6.82	0.00	0.04	0.10	0.43	0.02	0.01	0.05	0.64	0.52	3.14
1934	114,500	13.49	0.74	0.35	6.00	0.00	0.04	0.02	0.38	0.04	0.00	0.02	0.48	0.51	2.28
1935	115,000	13.93	0.55	0.27	6.79	0.00	0.00	0.02	0.26	0.00	0.00	0.06	0.34	0.63	2.68
1936	115,300	14.10	0.78	0.32	7.10	0.00	0.06	0.02	0.18	0.07	0.00	0.01	0.33	0.46	2.45
1937	123,030 For Rates 121,173	14.28	0.78	0.16	7.46	0.00	0.02	0.00	0.03	0.00	0.01	0.02	0.08	0.50	2.56

TABLE IX.

Comparative Statement of Vital Statistics, Year 1937.

	Population as estimated by Registrar- General, mid-1937.	Comparability Factor.	Birth-Rate.	Death-Rate.	Local Adjusted Death-Rate.	Death-Rates per 1,000 Population from—										Infantile Mortality Rate.	Maternal Mortality per 1,000 Total Births		
						Small-pox.	Measles.	Scarlet Fever.	Whooping Cough.	Diphtheria.	Typhoid and Para-typhoid.	Diarrhoea under 2 years.	Influenza.	Tuberculosis— Pulmonary.	Tuberculosis— Other Forms.		From Sepsis.	From other Causes.	Total.
Barnsley ... Blackburn ... Bradford ... Burnley ... Dewsbury ... Doncaster ... Halifax ...	69,470 114,000 289,510 89,670 53,050 71,280 97,490	1.16 1.03 1.00 1.08 1.03 1.08 0.98	16.59 11.7 13.85 11.71 15.7 14.87 12.8	12.85 15.2 14.74 15.53 14.79 11.57 14.6	14.9 15.6 14.74 16.77 15.2 12.49 14.3	— — — — — — —	— — 0.01 0.01 — — —	0.01 0.03 0.04 0.02 0.038 0.01 0.02	0.08 0.10 0.17 0.20 0.169 0.07 0.05	— — 0.01 — — — —	1.7 0.02 0.11 0.03 0.11 — 0.01	0.47 0.37 0.48 0.76 0.49 0.54 0.49	0.61 0.62 0.65 0.61 0.41 0.54 0.35	0.16 0.10 0.12 0.11 0.15 0.12 0.03	55 69 70 75.2 62.1 61.32 63	3.28 — 0.95 — — 0.89 —	1.64 6.34 1.67 1.79 2.36 2.68 2.39	4.92 6.34 2.62 1.79 2.36 3.58 2.39	
Huddersfield	121,173	1.04	12.78	14.28	14.85	—	0.02	—	0.03	0.01	0.02	0.49	0.50	0.09	61	0.62	0.62	1.23	
Leeds ... Oldham ... Preston ... Rochdale ... Rotherham ... Wakefield	491,880 127,800 113,600 91,940 75,740 59,250	1.07 1.12 1.11 1.05 1.15 1.08	14.8 13.18 14.00 11.9 16.99 14.7	13.36 15.86 14.23 15.4 11.42 12.3	14.3 17.76 15.79 16.17 12.13 13.3	— — — — — —	— 0.039 0.035 — 0.04 —	0.04 0.023 0.009 0.03 0.09 0.04	0.09 0.133 0.07 0.02 0.22 0.13	0.01 — — 0.01 — —	— 0.015 0.09 0.04 0.11 0.04	0.37 0.516 0.61 0.73 0.48 0.50	0.72 0.64 0.68 0.54 0.49 0.48	0.11 0.13 0.17 0.15 0.08 0.14	67 69 77 53 49 55	0.79 1.12 1.20 2.61 0.74 —	1.45 2.24 1.20 3.48 2.24 1.15	2.24 3.36 2.40 6.10 2.98 1.15	

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

Laboratory Facilities.

The Laboratory situated at the central Health Department provides a comprehensive service for dealing with the majority of investigations required in Public Health work. Tests carried out elsewhere, for which the Health Committee accepts financial responsibility, are as follows :—

(1) Examinations for the presence of tubercle bacilli in milk. These are based upon animal inoculations for which a special licence is necessary, and are carried out at the Huddersfield Royal Infirmary. The total number carried out during the past year was 175, of which 10 were positive, giving a percentage of 5.7.

(2) Wassermann tests in connection with Venereal Diseases work, for which also an animal licence is necessary. Such tests can be carried out most economically when large numbers of specimens are being dealt with, and so are best dealt with at centres which collect specimens from wide areas. For this reason, tests of this nature for the Huddersfield area are carried out at the Public Health Laboratory, Manchester.

The number of specimens examined last year was 1,307, being a decrease of 15 compared with the previous year, but 248 more than in 1935.

THE PUBLIC HEALTH LABORATORY.

Medical Officer : G. A. W. Neill, M.D., D.P.H.

By the facilities which it provides for bacteriological and biochemical investigations the Laboratory has become a most valuable branch of the Public Health Services. The number of examinations carried out during the year was less in the aggregate than in the previous year, but this was accounted for entirely by the further welcome decline in the prevalence of Diphtheria. On the other hand, by the use of research methods and the introduction of special investigations the scope and efficiency of the Laboratory have been increased.

(a) Bacteriological Work.

(1) DIPHTHERIA.

The number of swabs examined for the presence of *C. diphtheriæ* was 2,443, compared with 3,623 in 1936. In spite of this decline Diphtheria provided the largest and most important part of the work of the Laboratory.

The investigation, commenced in 1936, into the methods available for the routine examination of swabs was continued during the year, and as a result it became evident that the generally recognised method of examination could not be relied upon to give reliable results. This method depends upon examination at the end of from eighteen to twenty-four hours of the growth obtained in an incubator at a fixed temperature on Loeffler's serum medium. The gravis strain of Diphtheria, which has been the most prevalent type in the Borough

for the past few years, does not grow readily, however, on this medium, and if reliance is made upon the use of this only, microscopical examination of the resulting growth will at times provide unsatisfactory or misleading results. Several special selective media, containing tellurite, as described by various authorities, were investigated but found for a number of reasons to be unsuitable, the chief being the difficulties associated with their preparation. Eventually a new medium, containing potassium tellurite as the selective agent, was evolved and by its use most interesting results were obtained. The ingredients of the medium and its method of preparation were published in the *Journal of Hygiene* (Neill, *Journal of Hygiene*, Vol. XXXVII., October, 1937).

For purposes of comparison all the swabs received during the year were examined both by culture on Loeffler's medium and by plate growth on the special tellurite medium, and the following figures give an analysis of all the positive swabs detected during the year :—

Total positive swabs	Positive both methods	Positive on tellurite medium only	Positive on Loeffler's medium only
432	292	135	5

In addition to the above, 24 swabs examined gave a positive reading on the Loeffler's medium only but further examination by inoculation tests proved that these were non-virulent organisms which, though not true *Diphtheria* bacilli, closely resembled them microscopically.

These figures, without further elaboration, demonstrate most clearly the importance of this investigation, and indicate the practical value of the tellurite medium. By the accepted method of examination negative results would have been returned in 135, or 30 per cent., of the cases where in fact *Diphtheria* bacilli were present, whilst 24 results would have been returned as positive where in reality *C. diphtheria* was absent. The practical issue of this, both to preventive medicine and to the patients concerned, is obvious.

Typing of *C. Diphtheriæ*.

In the Report for 1936 reference was made to the introduction of an investigation into the types of *Diphtheria* prevalent in the Borough on the lines suggested by Professor McLeod of Leeds. During the past year this investigation was extended to include the typing of all strains of *C. diphtheriæ* which could be isolated in pure culture. The strains were obtained by isolating the organism found in each new case brought to notice and reported positive. It has generally been assumed that the classification of *Diphtheria* bacilli according to type could be carried out only at the largest laboratories, but a technique was evolved by the use of which even in a small laboratory typing can be carried out as a regular routine procedure. A description of this was published in the "*Public Health*" *Journal* (Neill, Vol. L., July, 1937). The widespread interest in this subject was demonstrated by the many inquiries which were received after the publication of the article here referred to. These came not only from various parts of Great Britain but also from workers as far afield as the United States of America and East Africa.

During the year 92 strains of *C. diphtheria* were obtained in pure culture from cases occurring in the Borough, and these were subsequently classified according to type as follows :—

Type	Number of Strains	Percentage of Total
Gravis	79	85.8
Mitis	9	9.8
Intermediate ...	1	1.1
Type IV.	2	2.2
Atypical	1	1.1

(2) ENTERIC FEVER.

Thirty-four specimens of fæces were examined for the presence of organisms of this group of diseases by the Wilson and Blair method of examination. In addition, 14 blood agglutination tests were made. In every case where an organism was isolated its identity was decided upon by fermentation, by its bio-chemical characteristics and by serological tests.

(3) TUBERCULOSIS.

Specimens of sputa examined during the year for the presence of Tubercle bacilli numbered 638, and of these 83, or 13 per cent., were reported to be positive. In addition to sputa, 6 specimens of urine were examined and the presence of Tubercle bacilli was demonstrated in 2 of these. Five specimens of pleural effusion were also examined, but neither in these nor in the specimens of pus examined were any Tubercle bacilli found.

(4) MENINGITIS.

Nine specimens of cerebro-spinal fluid were examined to determine the presence or absence of pathological organisms and in 3 of these the meningococcus which causes Cerebro-Spinal Meningitis was found to be present. Specimens in which no organisms were found were afterwards subjected to bio-chemical examination as an alteration in the chemical constitution of the fluid reveals at times the cause of the trouble.

(5) HÆMOLYTIC STREPTOCOCCI.

The most important organisms of this group are those responsible for Scarlet Fever and Puerperal Sepsis, though probably the infection most frequently produced is an inflammation of the throat giving rise to Tonsillitis, without the appearance of a rash. Altogether 22 specimens were examined for these organisms and the offending organism was isolated on 8 occasions. One blood culture, taken direct from the patient's blood, was carried out with a positive result. The hæmolytic streptococci offer a most important and very wide field for research, but this is handicapped in a small laboratory by the necessity for sufficient supplies of fresh human blood.

(6) GONORRHOEA.

The majority of examinations for the *Neisseria Gonorrhœa* are carried out at the Venereal Diseases Clinic, but a few are examined also at the Public Health Laboratory. These are received chiefly from the ante-natal clinics. During the past year 33 specimens were received for examination, and of these, 4 were reported positive.

(7) WATER EXAMINATIONS.

One specimen of spring water which supplied a dwellinghouse for domestic use was examined and found to be polluted.

Four specimens of water taken from the Municipal Swimming baths were examined by ascertaining the bacteriological content in order to determine the efficiency of the filtration and chlorination carried out there for the purpose of purifying the water. All four samples were satisfactory and demonstrated a high standard of purity.

Full details of these examinations and of their results are given elsewhere in this Report.

(8) EXAMINATION OF MILK.

At the commencement of the year the Milk (Special Designations) Order, 1936, came into operation, and as a result the Methylene Blue reduction test, to determine the standard of cleanliness of milk, was introduced into the Laboratory. As laid down in the Order, the bacterial plate count was retained for the examination of Pasteurised milk but the Methylene Blue test was used in examining milk supplied to schools and all ungraded milk. The Order does not impose upon the Authority the duty of testing samples of designated milk for the presence of *B. Coli*, but leaves its use as optional. Every sample of milk examined at the Laboratory was nevertheless subjected to this test.

In all, 374 samples of milk were examined by the Methylene Blue test during the year, and of these 342, or 91 per cent., did not reduce the Methylene Blue solution within the time permissible and so were classified as satisfactory. Of the 32 samples which did not reach the required standard of cleanliness, only 4 were samples of designated milk.

When subjected to the *B. Coli* test, 304, or 81 per cent., of the 374 samples examined attained the standard set out in the Order. According to this standard *B. Coli* must be absent in two out of three tubes in a dilution of 1/100 m.l.

In addition to the above, 9 samples of Pasteurised milk were examined by the bacteria count and by the *B. Coli* test.

(9) OTHER FOODSTUFFS.

One sample of shellfish was examined and found satisfactory.

(10) OTHER SPECIMENS EXAMINED.

A variety of specimens are received for examination from the Municipal Hospitals and Clinics. The most numerous dealt with are specimens of urine collected under aseptic conditions and sent for bacteriological investigation. Sixty of these were dealt with during the year and 42 specimens of pus or of sputum were examined for the presence of pathogenic organisms. From the School Clinic 8 swabs were received from cases of Stomatitis and in 4 of these the spirochæte responsible for Vincent's angina was found to be present. Details concerning other examinations carried out are given in the tabular statement which follows.

(b) Bio-Chemical Examinations.

The majority of the bio-chemical examinations required for the Municipal Hospitals and Clinics are carried out in the Public Health Laboratory. During the past year 46 examinations and estimations of this kind were carried out in the Laboratory.

(c) Preparation of Media.

With the exception of the Loeffler's blood serum which is used for the examination of swabs for Diphtheria, all the media required during the year were prepared on the premises. In these are included the special tellurite media used for growing Diphtheria Bacilli and those solutions used for typing and for bio-chemical work.

A summary of the year's work is given below in tabular form :—

(a) Bacteriological.

Specimen.	Investigation.	No. of specimens examined.	Positive results.
Swabs ...	Presence of <i>C. diphtheriæ</i> ...	2,443	432
Sputa ...	Presence of Myco Tuberculosis	638	83
Fæces ...	Presence of Enteric Organisms	34	13
Urine ...	„ „ „	8	2
Urine ...	Presence of Myco Tuberculosis	6	2
Blood ...	Agglutination for Enteric Organisms	14	2
Cerebro-spinal fluid	Presence of Meningococcus ...	9	3
Swabs & smears	Presence of Gonorrhœa ...	33	4
Swabs ...	Presence of Hæmolytic Strep-tococcus	22	8
Swabs ...	Diagnosis of Vincent's Angina	6	2
Swabs (Throat)	Organisms present ...	8	—
Sputa ...	All organisms present ...	22	—
Pus ...	„ „ „	20	—
Urine ...	„ „ „	60	—
Pleural fluid ...	„ „ „	5	—
Blood culture	„ „ „	3	1
Ascitic fluid ...	„ „ „	1	—
Vomit ...	„ „ „	1	—
Piece of skin ...	„ „ „	1	—
Swabs (from Eye)	„ „ „	5	—
Hair ...	Diagnosis of ringworm ...	1	1
Water ...	Bacteriological examination ...	5	—
Mussels ...	„ „ „	1	—
Milk ...	Methylene Blue test and <i>B. Coli</i> test	374	—
Milk (Pasteurised)	Plate Count and <i>B. Coli</i> test ...	9	—

(b) Bio-Chemical.

Blood ...	Blood sugar estimation ...	11	—
Blood ...	Blood urea estimation ...	20	—
Blood ...	Non-Protein nitrogen estimation	9	—
Fæces ...	Occult Blood ...	3	—
Urine ...	Complete chemical analysis ...	2	—
Total specimens examined ...		3,774	553

Ambulance Facilities.

For surgical, medical, or maternity cases, 4 private ambulances are available and can be hired by anyone requiring their services. In addition the Corporation maintains 7 ambulances. Three of these are in the care of the Police, 2 being used for accident cases and the third reserved for mortuary cases only. For dealing with infectious cases 3 ambulances are maintained by the Public Health Committee, whilst the seventh ambulance, which is maintained by the Public Assistance Committee, is reserved for non-infectious cases.

It is considered that the number of ambulances available is adequate for the needs of the area.

Nursing in the Home.

The following statement shows the number of nurses available for domiciliary nursing at the end of the year and by whom they were employed :—

Employed by the Maternity and Child Welfare Committee for the nursing of sick babies in their own homes	2 nurses.
Employed by the Queen Victoria Nurses' Association—	
For midwifery	1 Superintendent. 4 Midwives and 3 outside Midwives. 2 Pupils (normally 4).
For general nursing	1 Superintendent. 1 Assistant Superintendent. 16 Nurses.

The only change in these figures from those of the previous year resulted from the operation of the Midwives Act, 1936. As explained in the section of the Report dealing with Maternity and Child Welfare work, the Queen Victoria Nurses' Association accepted responsibility, on behalf of the Corporation, for all the midwifery work in the Borough not undertaken by independent midwives and as a result the number of midwives employed by the Association was increased from 4 to 7. As the number of independent midwives practising in the district decreases this number will in all probability be increased.

Clinics and Treatment Centres.

Name.	Situation.	Provided by.	Day and Time.
Antenatal Clinic	Public Health Department	Huddersfield Corporation	Monday to Friday, 1-30 p.m. to 3 p.m.
Child Welfare Clinic (Infants and Children, 1-5 years)	do.	do.	Monday to Friday, 3 p.m. to 5-30 p.m.
Dental Clinic (for expectant and nursing mothers)	do.	do.	3 afternoons per week, 4-30 p.m. to 5-30 p.m. (as required).
Voluntary Centre (Child Welfare)	Longwood	Voluntary Committee	Tuesday, 3 p.m. to 4 p.m. Fortnightly.
Voluntary Centre (Child Welfare)	Outlane	do.	Friday, 2-30 p.m. to 3-30 p.m. Fortnightly.

Name.	Situation.	Provided by.	Day and Time.
School Clinic	Public Health Department	Huddersfield Corporation (Education Committee)	Daily, 9 a.m. to 12 noon.
Dental Clinic (for School Children)	do.	do.	Daily (except Saturday afternoons). 9 a.m. to 12 noon, 1-30 p.m. to 5-30 p.m.
Artificial Light Clinic	do.	Huddersfield Corporation	For School Children, Monday, Tuesday, Thursday, Friday, 1-30 p.m. to 5-30 p.m. Tuesday & Friday, 11 a.m. to 12 noon (boys only). For children under 5 years, Wednesday, 1-30 p.m. to 5-30 p.m. For Tuberculosis patients, mornings from 9 a.m. onwards (as required).
Ophthalmic Clinic	do.	Huddersfield Corporation (Education Committee)	Tuesday, Thursday and Saturday, 9 a.m. to 12 noon.
Aural Clinic	do.	do.	Once monthly, Friday, 9-30 a.m., to 11-30 a.m.
Orthopædic Clinic	do.	Huddersfield Corporation (Education, and Maternity and Child Welfare Committees)	Once fortnightly. Wednesday, 10-0 a.m. to 12 noon.
Immunisation Clinic (against Diphtheria)	do.	do.	Tuesday & Thursday, 4-30 p.m. to 5 p.m.
Tuberculosis Clinic	do.	Huddersfield Corporation	Gold Therapy and Contacts, Monday, 2-30 p.m. onwards. Adult Males, Tuesday, 6 p.m. to 8 p.m. Adult Females, Thursday, 6 p.m. to 8 p.m. Children, Thursday, 2-30 p.m. to 4-30 p.m.

Name.	Situation.	Provided by.	Day and Time.
Venereal Diseases Clinic	York Place, New North Road. Adjacent to Huddersfield Royal Infirmary	Huddersfield Corporation	Men, Daily, 11 a.m. to 1 p.m. and 6 p.m. to 8-30 p.m., except Sunday, when hours are 10 a.m. to 12 noon. Women, Daily, 10 a.m. to 12 noon & 6 p.m. to 8-30 p.m.
Mental Clinic	Huddersfield Royal Infirmary	Huddersfield Infirmary Governors & West Riding Mental Hospitals Board	Wednesday, 3 p.m.
Special Ante-natal Clinic	do.	Infirmary Governors	Friday, 11-45 a.m.

Hospitals (Public and Voluntary).

(1) Huddersfield Royal Infirmary.

The number of beds now available at this institution and their classification are as follows :—

			ROYAL INFIRMARY		GREEN LEA	
			Male	Female	Male	Female
Surgical Beds	...	...	70	38	—	—
Medical Beds	...	...	20	21	—	—
Eye Beds	...	...	9	9	—	—
Ear, Nose, and Throat Beds			9	9	—	—
Children's Beds	...	...		40	—	—
Maternity Beds	...	...	—	15	—	—
Isolation Maternity Beds			—	—	—	8
Open Air Beds (Surgical)			—	30	—	—
Casualty—						
Tonsils and Adenoids				18	—	—
Accident	...	...		2	—	—
V.D.	...	...		2	—	—
Rothwell Ward (emergency use or ? infections)	...			2	—	—
Private Patients' Department (separate rooms)			—	—		19
			108	64	122	—
					19	8
			Total ... 321			

In the previous year's Report reference was made to the accommodation available for dealing with ante-natal cases, abortion cases, and cases of difficult labour, which, it has been realised for some time, is not quite satisfactory. The decision had then been made by the Governors of the Infirmary to open a new unit con-

taining 25 beds for this work, but so many difficulties have had to be considered in this connection, that little further progress has since been made. The greatest difficulty is the selection of a site for a unit of this kind for the hospital is entirely enclosed by other property. It is probable that the solution will be found by extending upwards and plans for an extension of this kind are now being considered.

(2) St. Luke's Hospital.

In the previous year's Report reference was made to the decision of the Council to erect a new Municipal Hospital which would be administered under the Public Health Acts and to which, when completed, all the sick from St. Luke's Institution would be removed. At the time of writing the previous year's Report the plans for this new Hospital had been prepared, accepted by the Council and finally approved by the Ministry of Health. One realises that after the plans showing the bare outlines of an institution of this kind have been approved a considerable amount of work and time are necessary for the preparation of the detailed plans and the estimation of quantities. At the same time it is somewhat disappointing to have to record a year later that building operations have not yet been commenced.

An assurance has been given, however, by the architects that everything will be in order very shortly for tenders to be invited for the erection of the buildings. In the meantime the position at St. Luke's is becoming more and more difficult and from time to time something in the nature of a "general post" becomes necessary to find accommodation for certain groups of cases or for cases requiring segregation or isolation. In spite of this the accommodation available for certain groups becomes, at times, overtaxed and the wards concerned overcrowded. In the children's wards particularly overcrowding is highly dangerous.

It would appear that the demand for admission to the hospital has steadily increased since an improvement was made in the facilities available for medical treatment and nursing. Also the proportion of cases, marked chronic, for whom no medical treatment is considered of any avail, has steadily decreased. At a census taken recently of all the patients in the hospital it was found that of the 193 then present 156 were considered to be in need of medical treatment or suitable for admission to the Children's Homes, whilst only 37, or 19 per cent., were classified as chronic and suitable for attention by attendants only.

The following tabular statement shows the accommodation provided at present at St. Luke's Hospital for medical, maternity, and mental patients, and the number of beds occupied on December 31st, 1937 :—

TABLE X.
St. Luke's Hospital.

Classification of Wards (1)	Num- ber of Wards (2)	BEDS							
		MEN		WOMEN		CHILDREN (under 16 years of age)		Total	
		Pro- vided (3)	Occu- pied (4)	Pro- vided (5)	Occu- pied (6)	Pro- vided (7)	Occu- pied (8)	Pro- vided (9)	Occu- pied (10)
1. Medical	14	78	67	116	87	—	—	194	154
2. Surgical									
3. Chronic sick									
4. Children	2	—	—	—	—	28	23	28	23
5. Venereal	—	—	—	—	—	—	—	—	—
6. Tuberculosis	—	—	—	—	—	—	—	—	—
7. Isolation	2	—	—	—	—	2	1	2	1
8. Maternity	2	—	—	8	6	—	—	8	6
9. Mental (observation)	2	4	—	—	—	—	—	4	—
Total	22	82	67	124	93	30	24	236	184

1. Total number of admissions (including infants born in hospital) 1275
2. Number of women confined in hospital 190
3. Number of live births 183
4. Number of still births 11
5. Number of deaths among the newly-born (i.e. under four weeks of age) 9
6. Total number of deaths among children under one year (including those given under 5) 15
7. Number of maternal deaths among women admitted to hospital for confinement 1
8. Total number of deaths 243
9. Total number of discharges (including infants born in hospital) 1045
10. Duration of stay of patients included in 8 and 9 above. Give number of cases whose total stay was for the following periods :—
 - (a) Under four weeks 331
 - (b) Four weeks and under thirteen weeks 546
 - (c) Thirteen weeks or more 411
11. Number of beds occupied (excluding cots in maternity wards) :—
 - (a) Average during the year 205
 - (b) Highest, on 23/1/37 236
 - (c) Lowest, on 27/6/37 157
12. Number of surgical operations under general anæsthetic (excluding dental operations) Nil
13. Number of abdominal sections Nil

Classification of in-patients who were discharged from or who died
in the Institution during the year ended 31st December, 1937—

DISEASE GROUPS	Children (under 16 years of age)		Men and Women	
	Dis- charged	Died	Dis- charged	Died
Acute infectious disease	4	—	3	—
Influenza	12	5	55	23
Tuberculosis—				
Pulmonary	1	—	9	2
Non-pulmonary	—	—	3	—
Malignant disease	—	—	13	20
Rheumatism—				
(1) Acute rheumatism (rheumatic fever) together with sub-acute rheumatism and chorea	2	—	5	—
(2) Non-articular manifestations of so-called “rheumatism” (mus- cular rheumatism, fibrositis, lum- bago, and sciatica)	—	—	—	—
(3) Chronic arthritis	—	—	12	2
Venereal disease	—	—	1	—
Puerperal pyrexia	—	—	—	—
Puerperal fever—				
(a) Women confined in the hospital	—	—	—	—
(b) Other cases	—	—	—	—
Other diseases and accidents connected with pregnancy and childbirth	2	9	10	1
Mental diseases—				
(a) Senile dementia	—	—	3	4
(b) Other	—	—	60	2
Senile decay	—	—	37	45
Accidental injury and violence ...	1	—	35	8
In respect of cases not included above :				
Disease of the Nervous System and Sense Organs	11	2	17	—
Disease of the Respiratory System ...	27	1	70	31
„ „ Circulatory System ...	—	1	77	78
„ „ Digestive System ...	13	—	26	6
„ „ Genito-urinary System	1	—	2	3
„ „ Skin	28	—	30	—
Other diseases	22	—	67	—
Mothers and infants discharged from Maternity Wards and not included in above figures—				
Mothers	—	—	189	—
Infants	174	—	—	—
Any persons not falling under any of the above headings... ..	16	—	7	—
Totals	314	18	731	225

(3) Mill Hill Isolation Hospital.

The prevalence of Scarlet Fever and of Diphtheria declined still further during the year and as a result the demand for accommodation was the lowest experienced for several years. The maximum number of patients under treatment at any time was on April 4th, when 62 beds were occupied. From then onwards the number under treatment steadily declined and the minimum number was reached on November 5th, when only 31 beds were occupied. The daily average for the entire year was 45, compared with 65 in 1936, 85 in 1935, and 120 in 1934.

Cases of advanced Tuberculosis, treated at the hospital, are included in the above figures. Their number varied from 19 to 11. One of the large wards has recently been renovated for their use and provides excellent accommodation for patients of this kind, for whom the more exacting open-air life of the Sanatorium is not so comfortable.

The extension to the hospital, referred to in the previous Report, is now almost completed. It has added greatly to the comfort of both patients and staff and provided accommodation for classification and isolation, which is now in keeping with the modern views of epidemiology.

With the opening of two new cubicle blocks, each of which contains 28 beds, and the pulling down of the wooden pavilion, previously condemned, the number of beds available now stands at 172.

Table XX. gives a summary of the cases dealt with in the hospital during the year. It shows that the admissions for the year were 280. This compares with 496 in the previous year and 800 in 1935.

Of the cases treated, the following figures give details of their stay in hospital, grouped according to the diseases for which they were admitted. Figures for recoveries and deaths are given separately.

Disease.			Average number of days' stay in Hospital.	
			Recoveries.	Deaths.
Scarlet Fever	...	...	33.9	0.0
Diphtheria	...	...	58.0	5.6
Enteric Fever	...	...	88.5	0.0
Diphtheria Carriers	...	...	38.9	0.0
Erysipelas	...	...	19.1	2.0
Observation	...	...	41.6	13.0
Measles	...	...	26.1	0.0
Cerebro-Spinal Meningitis	...	...	45.5	0.0
Observation Diphtheria	...	...	26.2	0.0
Whooping Cough	...	...	30.0	0.0
Observation Scarlet Fever	...	...	17.0	0.0
Pneumonia	...	...	60.0	0.0
Observation Typhoid Fever	...	...	8.0	0.0

(4) **Bradley Wood Sanatorium.**

The extensions to this institution, referred to in last year's Report, are now proceeding. These are being carried out in three stages. The first of them, namely, the erection of a new Recreation Hall, has recently been completed. It provides excellent accommodation for entertainments which in the winter months especially should be most acceptable and definitely helpful to the patients who, owing to the nature of their illnesses, are compelled to spend long periods of residence in the Sanatorium. Good progress has been made also with the second stage of the extension. This consists of a new block containing 26 beds for female patients, and a residence for the Assistant Tuberculosis Officer, who is Resident Medical Officer at the Sanatorium. The third stage, which includes the enlargement of the Nurses' Home, cannot be proceeded with until the second has been completed, as it involves the building of an additional storey to the whole of the administrative block and so it will be necessary for the staff to use the new block for sleeping accommodation whilst the alterations are being carried out. At the other municipal hospitals the hours of duty for nursing and domestic staff have been reduced but, for the present, little change can be made at Bradley Wood Sanatorium owing to the accommodation available for staff being already fully utilised.

Before the extensions referred to above could be undertaken it was necessary to obtain possession of some of the surrounding land and at the same time it was considered advisable to purchase an area immediately surrounding the Sanatorium to avoid the risk of the open space surrounding the institution being encroached upon at some future date by housing developments. The area purchased, which contains forty-six acres, chiefly woodland, should be a useful asset in this respect.

(5) **Municipal Maternity Home.**

The Report for 1936, referring to the Municipal Maternity Home, states that plans for a new extension had been approved by the Council and forwarded to the Ministry of Health for approval. A month ago there was every indication that in this year's Report the matter would have been referred to as being *in statu quo*. Now, however, a contract for the work has been accepted and at the time of writing building operations have actually commenced. The new block in course of erection will contain 25 beds, in either single bedded wards or in very small units. In addition there will be a new isolation section, two new labour wards, and a second nursery. To provide accommodation for the extra staff required, the nurses' quarters are being extended and a new sewing room and lecture room are being included. When completed the Home will contain 57 beds, and it is anticipated that the admissions will then approximate 100 per month. During the past year the total number of admissions was 742, being 41 less than in the previous year. The slight reduction was not due to any falling off in the demand for admission, but was brought about by a deliberate restriction of the number of bookings to ensure safety. Actually the booking list had to be closed from two to three months ahead throughout the whole of the year. This meant that those who delayed making arrangements about entering the Home until a late stage had to be refused.

Poor Law Medical Relief.

The arrangements in operation for the provision of medical assistance to those in poor circumstances remain unchanged. In a few areas the "open choice" method has been introduced and a discussion regarding it took place during the year. It was decided, however, to abide by the present scheme. The public who are served seem quite satisfied with this arrangement ; at any rate no complaints or representations against it have been received. In conjunction with this it has been found that the district medical officers who carry through the work are satisfied, those responsible for the administrative side of the work are convinced that a reasonably good service is being provided, and so there seem to be no adequate grounds for recommending that it should be carried out in any other way.

For this service the Borough is divided into 10 areas, two new areas having been added during the year as a result of the Borough extension. Besides necessitating the formation of two new areas the extension caused certain districts to be added to existing areas. Partly as a result of this and partly owing to the widespread redistribution of population caused by the slum clearance programme of the Housing Committee, the population figures given for the areas at the last census have been so much altered that it would be misleading to quote them.

The names of the medical officers in charge of the areas and a summary of their attendances are given below :—

Area No.	NAME.	MEDICAL OFFICER.	WORK DONE.					
			H. Attendances at Patients' own Houses.	S. Attendances at Surgery or M.O.'s House.	M. Medicine supplied without seeing patient.	H.M. Attendances at Patients' Houses and medicine supplied.	S.M. Attendances at Surgery and medicine supplied.	Total.
1	Lindley ...	Dr. R. C. McIntosh	50	2	33	38	19	142
2	Paddock and Longwood	Dr. R. C. McIntosh	238	11	296	125	84	754
3	Marsh, W. Central, S. Central & N. Central	Dr. J. J. Hanratty	804	156	169	306	635	2,070
4	Birkby and Fartown	Dr. J. McCurdy ...	67	9	30	31	86	223
5	Dalton, Bradley, Deighton and Moldgreen (Division made 13/12/37 see Area No. 10)	{ Dr. S. Prior ... { Dr. E. C. H. Ewart (from 1/7/37)	680	510	—	—	—	1,190
6	Almondbury ...	Dr. R. J. Ogden ...	410	140	—	—	—	550
7	Newsome ...	Dr. S. H. Waddy ...	213	10	75	98	87	483
8	Lockwood and Crosland Moor	Do.	240	20	96	127	102	585
9	Milnsbridge ... (Added Area from 1/4/37)	Dr. S. Hall ...	24	3	5	13	7	52
10	Part of Dalton, Bradley and Deighton ... (From 13/12/37)	Dr. W. C. Cresdee...	—	8	1	—	—	9
			2,726	869	705	738	1,020	6,058

MENTAL DEFICIENCY SERVICES.**(1) Statistics.**

The number of mental defectives dealt with, or liable to be dealt with, at the end of the year was as follows :—

	Males.	Females.	Total.
At St. Catherine's Institution, Doncaster	37	31	68
On licence from St. Catherine's Inst.	1	1	2
At Royal Albert Institution, Lancaster	1	—	1
At Sandlebridge Institution	1	—	1
At Rampton State Institution	4	1	5
At St. Joseph's R.C. Certified Home, Sheffield	—	1	1
At Brentry Colony, Bristol	2	—	2
At Storthes Hall Mental Hospital ...	5	6	11
At St. Mary's Hospital, Deanhouse ...	—	1	1
At St. Luke's Hospital, Huddersfield	10	16	26
At Mill Hill Hospital, do.	—	1	1
At Children's Homes, Scholes	1	—	1
Under guardianship at Leeds	1	—	1
Under supervision at home	36	33	69
Total	99	91	190

Cases transferred under West Riding Review Order, 1937 :—

At County Public Assistance Institution, Settle	1	—	1
At Rawcliffe Hall, nr. Goole	—	2	2
Under supervision at home... ..	3	3	6
Total	4	5	9
Grand Total	103	96	199

The total number of cases on the list at the end of the previous year was 178. The increase which occurred during 1937 can be accounted for, to some extent, by the cases transferred in pursuance of the West Riding Review Order.

(2) ASCERTAINMENT.

The new cases dealt with during the year were reported from the following sources :—

	No. of Cases.
Notified by Education Committee under Article II. A of Mental Deficiency (Notification of Children) Regu- lations, 1928	5
Notified by Education Committee on leaving a Special School on or before attaining the age of sixteen years	3
Notified informally by Education Committee for super- vision in accordance with Section 4 of Board of Edu- cation's Memorandum No. 151	5
Notified by parent as defective in need of training which could not be provided at home	1
In Public Assistance Institution	3
Removed from other area	1
Transferred under West Riding Review Order, 1937 ...	9
Total	27

The 27 cases were dealt with as follows :—

	No. of Cases.
Placed under Statutory Supervision	18
(The names of 2 of these cases were put on the waiting list for St. Catherine's Institution.)	
Admitted to Institutions	2
Admitted to Storthes Hall Mental Hospital as "place of safety"	1
To remain at St. Luke's Hospital until accommodation is available at St. Catherine's Institution)	2
To remain at Institutions (cases transferred under West Riding Review Order)	4
Total	27

(3) PROVISION OF INSTITUTIONAL ACCOMMODATION.

No change occurred during 1937 in the amount of accommodation available at St. Catherine's Institution which remained at 300 beds. It is estimated that the extension which has been in progress for some time will be completed during the first half of next year.

The following tabular statement shows the number of beds allocated to Huddersfield and the number of cases whose names were on the waiting list at the end of the year :—

	MALE BEDS			FEMALE BEDS		
	High Grade	Low Grade	High Grade (Boys under 16)	High Grade	Low Grade	Total
Total Accommodation	120	20	20	120	20	300
Allocated to Huddersfield Authority	25	4	4	27	4	64
Occupied by Huddersfield patients	31	4	3	27	4	69
	(Including 1 on Licence Leave) (3 beds loaned by Halifax 2 loaned by Wakefield)		(1 loaned to Wakefield)	(Including 1 on Licence Leave)		
Number of Huddersfield patients for whom admission is recommended	12	6	4	19	7	48

The following shows the amount of additional accommodation which will be available when the extension is completed, and the number of beds in each block allocated to Huddersfield :—

	MALE BEDS			FEMALE BEDS		
	High Grade Adult	Low Grade Adult	High Grade Children	High Grade Adult	Low Grade Adult	High Grade Children
Total additional Accommodation	—	20	30	60	20	50
Allocated to Huddersfield Authority	—	4	6	12	5	11

(4) GUARDIANSHIP.

As will be noted from the statistics in (1) above, one case is at present under guardianship at Leeds. The boy is in full time attendance at Sheepscar House Industrial Centre.

(5) SUPERVISION.

At the end of the year there were 75 names on the list of cases under supervision by the Woman Visitor to the Mental Deficiency Committee. Sixty-five cases were being visited at quarterly intervals, and 10 cases at monthly intervals as it was considered that more frequent visitation was necessary.

(6) OCCUPATION CENTRES AND HOME TRAINING.

No arrangements have been made for the establishment of the above in this area.

(7) LICENCE, DISCHARGE AND AFTER CARE.

Four cases were on licence leave during the year, three from St. Catherine's Institution and one from the Royal Albert Institution, Lancaster. Particulars of these cases are given below.

One girl is employed as a maid for the female staff at St. Luke's Hospital. In April 1937, leave was extended for a further twelve months.

Two men were licensed out from St. Catherine's Institution during the previous year. In one case leave was extended in view of satisfactory reports received, but in the other case the parents found that the care of the boy was becoming too much for them and he was accordingly returned to St. Catherine's.

Of the cases transferred to the care of the Mental Deficiency Committee following the West Riding Review Order, one girl had been on licence leave from the Royal Albert Institution for two years. The girl was in employment and was being well cared for by her mother. Discharge from the licence was recommended and this was granted by the Board of Control. The girl is under the supervision of the Visitor to the Mental Deficiency Committee.

All cases on licence leave are kept under supervision by frequent visitation.

MATERNITY AND CHILD WELFARE WORK.

Maternal Welfare.

(a) Ante-natal Care.

During the past year 1,898 births were notified in the County Borough, being an increase of 105 over the number for the previous year. Of these, 1,588 had been ante-natally notified, giving a percentage of 83.7. The scheme for the notification of pregnancy, on a voluntary basis, was introduced in the year 1916 and we find that almost every year since its inauguration has brought a new record in the percentage of notifications received. This is demonstrated by the following figures :—

Year	Percentage	Year	Percentage
1916	... 11.2	1927	... 34.6
1917	... 24.1	1928	... 35.0
1918	... 34.6	1929	... 48.7
1919	... 34.1	1930	... 45.8
1920	... 37.5	1931	... 50.7
1921	... 38.3	1932	... 62.6
1922	... 31.1	1933	... 69.8
1923	... 33.5	1934	... 77.1
1924	... 34.2	1935	... 79.3
1925	... 36.3	1936	... 82.0
1926	... 40.5	1937	... 83.7

The continued increase in the notifications and the high percentage of notifications now attained must be something of a surprise to those who opposed the introduction of the scheme when it was first proposed on the grounds that public opinion would never tolerate such an intrusion into the secrets of family affairs. There are now, and no doubt always will be, a few women who prefer secrecy, particularly those unmarried expectant mothers who hope up to the actual time of confinement that something may intervene to terminate their pregnancies, but the above figures, supported by the percentage for the present year up to date, which is 88.3, indicate that generally speaking the mothers of the district appreciate the value of medical ante-natal care. Notification does not mean, of course, that the ante-natal care must be given by the Public Health staff, for in many cases it is given by patients' private practitioners. It does ensure, however, that this supervision and necessary care are given, and for those who desire that it be given by the Assistant Medical Officers of Health it can be received either at the central clinic, or at the patients' own homes, according to their wishes in the matter.

The following visits and consultations were made by the Assistant Medical Officers of Health during the year :—

Visits paid to homes.

First visits	...	...	...	...	980
Re-visits	...	...	...	...	4160
TOTAL...					5140

Consultations at the Clinic.

First interviews	...	...	...	1046
Further interviews	...	...	...	2856
TOTAL...				3902

As a result of the examinations carried out, the following cases were reported for medical attention :—

REFERRED TO MEDICAL PRACTITIONERS—

Toxæmias of pregnancy	...	...	...	23
Albuminuria and/or high blood pressure	...	...	...	13
Contracted pelvis and disproportion	...	...	...	11
Malpresentation	...	...	...	11
Pyelitis	...	...	...	3
Post-maturity	...	...	...	1
Placenta prævia	...	...	...	1
Incomplete abortion	...	...	...	1
Anæmia	...	...	...	1
Varicose ulcer	...	...	...	1
Ante-partum hæmorrhage	...	...	...	1
Other conditions	...	...	...	2
TOTAL				69

REFERRED TO THE OBSTETRIC SURGEONS AT THE HUDDERSFIELD ROYAL INFIRMARY—

Disproportion and contracted pelvis	...	...	...	17
Malpresentation	...	...	...	7
Multiple pregnancy	...	...	...	6
Albuminuria and/or high blood pressure	...	...	...	1
Ante-partum hæmorrhage	...	...	...	1
Suspected ovarian cyst	...	...	...	1
Toxæmias of pregnancy	...	...	...	1
TOTAL				34

One of the most pleasing features of the above figures was the drop which occurred in the number of cases dealt with under the headings Toxæmia, Albuminuria and High Blood Pressure. These numbered 36 compared with 72 in the previous year.

(b) Assistance at Confinement.

(1) Maternity Outfits.

It is now widely known that these outfits are provided free of cost in cases of poverty or of emergency and the demand for them has still further increased. The parcels are made up at the Municipal Maternity Home and can be obtained there at any hour of the day or night. Their issue was introduced in the year 1932 and the following figures show how the demand for them has increased since then :—

Year	Number given out			
1932	11
1933	27
1934	21
1935	51
1936	93
1937	120

(2) Maternity Beds.

The number of beds available for maternity cases in the Borough and the use made of them during the year are shown below :—

Institution.	No. of Beds provided.	No. of Cases delivered.	No. of Births (including Still births) notified.
Municipal Maternity Home ...	32	742	753
St. Luke's Hospital	8	190	193
Green Lea Hospital	8	5	5
Armitage Road Nursing Home	2	2	2
Trinity Street Nursing Home	2	11	11
Bradley Lane Nursing Home	4	33	33
Royal Infirmary	15	163	171
TOTAL NUMBER ...	71	1146	1168

The Trinity Street, Bradley Lane, and Armitage Road Nursing Homes are private institutions which take maternity patients in addition to medical and surgical cases. The Matron of the Armitage Road Home, who was a certified midwife, retired under compensation as permitted by the Midwives Act, 1936, and her certificate was surrendered in October, 1937, so that henceforth this Home will not receive any maternity cases.

The above figures show that 1,146 patients were delivered in institutions in the Borough and that the actual number of births notified from these institutions was 1,168. The difference between these figures is accounted for by multiple births and by some notifications being received after the year end in which confinement took place.

Of the 1,898 births and 100 still births notified during the year, the above figures show that 1,168, or 58 per cent., took place in institutions, and of these 753, or 38 per cent., took place in the Municipal Maternity Home.

(3) Medical Assistance.

In case of any emergency arising during pregnancy, or confinement, a midwife may call a medical practitioner to her assistance, and, in accordance with Section 14 of the Midwives Act, 1918, the Local Supervising Authority is required to pay the practitioner called upon for his services. A scale of payment, fixed by the Ministry of Health, applies in these cases. It is subject to certain limitations which are defined, and the amount paid may be reclaimed from the patient.

During the past year 282 such "Calls for Help" were issued, and accounts for 205 have been passed for payment. The amount involved was £306 15s. 0d.

The conditions for which medical assistance was summoned were as follows :—

Ruptured perineum	...	...	...	83
Delayed labour	...	...	...	42
Unsatisfactory condition of child	...			28
Discharging eye	...	...	...	20
Malpresentation	...	...	...	17
Pyrexia	...	...	...	17
Unsatisfactory condition of mother	...			14
Premature labour	...	...	...	13
Albuminuria and/or High Blood Pressure				9
Post-partum hæmorrhage	...	...		8
Ante-partum hæmorrhage	...	...		7
Stillbirth	...	...	...	7
Contracted pelvis and disproportion	...			3
Retained placenta	...	...	...	3
Convulsions	...	...	...	2
Baby born before arrival	...	...		1
Miscarriage	...	...	...	1
Prolapse of cord	...	...	...	1
Twins	...	...	...	1
Other conditions	...	...	...	5
				<hr/> 282 <hr/>

(4) Consultant Services.

Any medical practitioner when attending a confinement within the Borough, either in the Municipal Maternity Home, or in the patient's own home, can, if he thinks that additional medical help is advisable, obtain the assistance of a Consultant Obstetrician, whose fee is guaranteed by the Local Authority.

The number of these consultations asked for during the year was 38.

(c) Post-natal Care.

(1) Examinations.

The value of ante-natal care is now widely recognised, but it is surprising how few women appreciate that much ill-health and suffering may be prevented by thorough post-natal examinations. When visiting the mothers in their own homes the Assistant Medical Officers have excellent opportunities to explain the benefit of such examinations and they invariably do so. We find, nevertheless, that only a small percentage of the mothers so interviewed are convinced that an examination is advisable. When the strain occasioned by pregnancy and confinement has passed they experience a feeling of relief which prompts them to scoff at trivial discomforts and to belittle the risks which may be encountered in later life by the neglect of some slight disability.

During the past year the total number of women who consented to be examined was 313 and the number of examinations carried out was 464. Of those examined, 34, or 11 per cent., were found in need of medical treatment.

Further statistics relating to this service are as follows :—

VISITS PAID TO HOMES—

First visits	.....	...	...	1,111
Re-visits	...	...	...	1,656
TOTAL ...				2,767

CONSULTATIONS AT THE CLINIC—

First interviews	...	...	...	74
Further interviews	...	...	...	30
TOTAL ...				104

Conditions for which patients were referred to general practitioners or to obstetric surgeons :—

Anæmia	...	...	...	...	9
Leucorrhœa	...	...	...	...	5
Mastitis	...	...	...	...	4
Breast abscess	...	...	...	...	2
Prolapse uteri	...	...	...	...	2
Retroverted uterus	...	...	...	...	2
Subinvolution	...	...	...	...	2
Nephritis	...	...	...	...	1
Menorrhagia	...	...	...	...	1
Ulcer on vulva	...	...	...	...	1
Varicose veins	...	...	...	...	1
Cystitis	...	...	...	...	1
Cervicitis	...	...	...	...	1
Cystocele	...	...	...	...	1
Debility	...	...	...	...	1
TOTAL ...					34

(2) Home Helps and Daily Assistants.

Three Home Helps and five Daily Assistants were employed regularly during the year, their duty being to assist with, or to take full charge of, the housework in maternity cases. The value of this service is demonstrated by the great demand which is made upon it. Many requests are received at the Health Department for help of this kind, not only from those who are entitled to it under the Maternity and Child Welfare Scheme, but also from a large number of persons confined to bed through illness. Such cases cannot, of course, be assisted in this way but the requests received are an indication that those who have been helped under the Maternity and Child Welfare arrangements have appreciated the assistance given and told others about the services provided.

The following is a statistical record of the work carried out during the year :—

	By Home Helps	By Daily Assistants
No. of new homes visited	94	228
Total No. of homes visited	157	469

(3) Provision of Milk.

In necessitous cases, milk is provided by the Maternity and Child Welfare Committee for expectant mothers, nursing mothers, and for infants who are artificially fed. As in previous years the supply was limited to dried milk only. The quantity issued was 12,640 lbs., being 768 lbs. more than in the previous year, and the expenditure on this at £470 16s. 0d. was £145 19s. 0d. more.

In addition to dried milk a supply of cod liver oil, either in the form of emulsion or of pure cod liver oil, is available for distribution on the recommendation of the Assistant Medical Officers. The amount distributed has increased in recent years, but is still not excessive, considering the value of this material to young children. Last year's supply was 3,744 bottles at a cost of £93 12s. 0d.

In 1935 the quantity of dried milk issued was 11,200 lbs., and the cost of this was £206. It will be observed from the figures given above that expenditure on this service has been more than doubled although the increase in the quantity of milk issued was 1,440 lbs., being only a little more than a 10 per cent. increase. The increase in the quantity issued has been due partly to less favourable conditions of employment and partly to the greater amount of assistance rendered to children between one and five years of age, as recommended by Circular 1519 of the Ministry of Health. The main jump in the expenditure was due in most part to the higher prices which had to be paid for the milk itself. As purchased in bulk by the Department, the price must still be considered low at approximately 9d. per lb., but in the year 1935 milk of first grade quality was obtainable at less than 5d. per lb.

MATERNAL MORTALITY.

There were only 2 maternal deaths during 1937, giving the exceptionally low maternal mortality rate of 1.23 per 1,000 births registered, counting both live and still births. If reckoned upon the number of births **notified** the rate would be 1.29, or if calculated according to the number of **live births registered** the rate would be 1.30.

The following figures give a comparison between the local mortality figure and that of England and Wales :—

		Puerperal		Total.
		Sepsis.	Others.	
The maternal mortality rates for England and Wales are as follows :	per 1,000 Live Births	0.97	2.26	3.23
	per 1,000 Total Births	0.94	2.17	3.11
The maternal mortality rates for Huddersfield are as follows :	per 1,000 Live Births	0.65	0.65	1.30
	per 1,000 Total Births	0.62	0.62	1.23

Causes of Death.

The following is a brief synopsis of the history recorded in the detailed reports submitted to the Ministry of Health regarding these two deaths :—

- (1) Pregnancy not notified, but patient, who was in comfortable circumstances, had ante-natal care from own doctor. Two

slight hæmorrhages about mid-term, but no signs of placenta prævia. Condition otherwise normal throughout. Patient delivered without difficulty of a full-term macerated foetus.

Cause of death : (a) Puerperal septicæmia.

(b) Delivery of a macerated foetus.

- (2) Pregnancy notified and supervised by Medical Officer of Health's staff. Referred to own doctor and later to consultant, Royal Infirmary, on account of hyperpiesis and albuminuria. This cleared up under treatment but patient retained in hospital on account of slight contraction of pelvis. Cæsarean Section found necessary and carried out by consultant obstetrician. Subsequently patient developed paralytic ileus.

Cause of death : (a) Paralytic ileus.

(b) Cæsarean Section for obstructed labour.

Enough of the history in the above cases has been given to indicate that both received adequate ante-natal care, and all the attention at confinement and subsequently which medical science could provide. So far as our records show, the maternal mortality for the year was the lowest yet recorded and the above are illustrations of deaths which, according to our present knowledge of the subject, could not have been avoided.

The following particulars give further detailed information regarding the above mentioned cases :—

AGE INCIDENCE.

30-35	...	...	...	...	...	2	
Primiparæ	...	...	...	...	...	2	
Live birth	...	...	...	...	...	1	
Still birth	...	...	...	...	...	1	
Doctors' cases	...	...	...	...	...	2	
Death at home	...	...	...	...	...	1	
Death in institution (admitted prior to onset of labour)	...	...	...	...	...	1	
Ante-natally notified and supervised by the Medical Officer of Health's Staff						1	
Ante-natally notified and supervised by private doctor	...	...	...	...	...	1	
							Rate per 1,000
				Number	Deaths		
Pregnancies ante-natally notified and supervised by the Medical Officer of Health's staff, 1937	...	...	930	1	1.1		
Other pregnancies (as ascertained by the birth notifications), 1937	...	713	1	1.4			
Pregnancies ante-natally notified and supervised by the Medical Officer of Health's staff during the past fifteen years	...	...	12,347	35	2.8		
Other pregnancies (as ascertained by the birth notifications) during this period	...	...	11,252	98	8.7		

The Public Health (Notification of Puerperal Fever and Puerperal Pyrexia) Regulations, 1926.

No. of cases of Puerperal Sepsis or of Pyrexia notified, 1937	32
No. of cases notified, 1936	27

Amongst the 32 cases notified in 1937

In 25 the births were notified from institutions.

In 1 the birth was notified by a doctor at home.

In 2 the births were notified by midwives at home.

In 2 the births were notified by midwives at home (doctor attending at time of birth).

In 1 the birth occurred at home (outside the Borough) and the patient was later removed to an institution.

In 1 pyrexia followed abortion.

The cause of the Pyrexia in the cases notified was stated to have been as follows :—

Mastitis	7
Infection of lochia	3
Pyelitis	2
Coli infection	2
Septicæmia	2
Vaginitis	1
Still birth	1
Nephritis	1
Septic tear	1
Sepsis uteri	1
Phthisis	1
Phlebitis	1
Miscarriage	1
Mental derangement	1
Hydramnios and Cæsarean Section	1
Adherent offensive placenta	1
Sapræmia	1
Fibroids and shock	1
Uræmia	1
Ante-partum hæmorrhage and still birth	1
Not known	1
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TOTAL	32
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Dental Treatment under the Maternity and Child Welfare Scheme.

A scheme for the provision of dental treatment for expectant and nursing mothers was put into operation in 1935 and as time passes the services rendered are gradually being more fully appreciated and more extensively used. The following figures show the progress of this work since its inception :—

	1935	1936	1937
No. of cases treated ...	61	89	91
Total attendances ...	160	344	350
No. of extractions ...	388	622	277
No. of fillings	13	12	3
No. of scalings	8	3	—
No. of dentures supplied	—	29	81

Infant Welfare.

NOTIFICATION OF BIRTHS ACT, 1907.

(a) Number of births notified in 1937	...	...	...	1,898
Number of births registered in 1937	...	...	...	1,543

	Resident	Non-resident	Total
Notifications	1,554	344	1,898
Notified by doctors ...	92	2	94
Notified by midwives ...	1,449	337	1,786
Notified by parents, relatives, and others ...	13	5	18

(b) Number of still births notified—

	Resident	Non-resident	Total
Notifications	81	19	100
Notified by doctors ...	5	—	5
Notified by midwives ...	73	19	92
Notified by parents, relatives, and others ...	3	—	3

(c) Number of births with—

	Resident	Non-resident	Total
(1) Doctors in attendance	691	121	812
(2) Midwives only in attendance ...	863	223	1,086
Total ...	1,554	344	1,898

Infant Visiting.

In accordance with the Special Scheme for Infant Welfare, adopted in June 1928, the following routine visits are paid by an Assistant Medical Officer of Health :—

- (1) As soon as possible after notification.
- (2) Once a week for the first four weeks.
- (3) Once a fortnight for the next two months.
- (4) Once a month for the final nine months.

Additional visits are paid as considered necessary in the interests of mother and child.

The Assistant Medical Officers also supervise, as far as time will allow, children between one and five years, in their respective districts, particularly those children who are known to require the greatest amount of supervision.

No treatment other than that of a special character is provided. Young children requiring orthopædic, or dental, treatment, can be dealt with at the clinics, but in other cases, where medical attention is advisable, the mother is recommended to consult her family doctor.

Record of visits to infants during the year :—

Number of first visits paid to births notified ...	1628
Number of re-visits ,, ,, ,, ...	21825
<hr/>	
Total	23453
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Number of first visits paid to children one to five	478
Number of re-visits ,, ,, ,, ...	5844
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Total	6322
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Infant Clinics.

The five Assistant Medical Officers of Health each reserve one afternoon per week for attendance at the clinic held in the Public Health Department for infants and children from one to five years of age.

Children are weighed on these occasions, and, if necessary, examined by the Medical Officers. Advice is given to the mothers regarding the management and feeding of the babies, but little treatment is given.

There are also 2 clinics held fortnightly, one at Longwood, and the other at Outlane. These clinics were commenced and are still run by voluntary enterprise, but they are attended by the Assistant Medical Officers for those districts.

In addition, an Ultra-Violet Ray Clinic is held weekly at the Public Health Department for children up to five years of age who suffer from rickets, debility, skin diseases, &c. The large number of attendances made shows that this form of treatment is appreciated, and the Medical Officers continue to report that from it they obtain good results.

ATTENDANCES AT CLINICS—

Age	New Cases	Total Attendances
Under one year ...	522	3046
One to five years ...	1005	2673
Under five years ...	296	1863
(Ultra-Violet Ray Clinic)		
<hr/>		<hr/>
Total	1823	7582
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Routine Medical Examination of Young Children.

A circular letter is sent to the parents of all children in the Borough, as the children become three years of age, offering a complete medical examination and pointing out the merit of such an examination. When the post card which had been forwarded at the same time is returned, an appointment is made for the child to be examined at a definite time, either at the Central Clinic, or in the child's own home.

Number of children examined :—432

TABLE OF DEFECTS.						No. of children referred for treatment	No. of children referred for observation
Defect.							
Malnutrition	...	...	...	...	...	16	11
Skin—							
Scabies	...	...	...	...	...	1	—
Impetigo	...	...	...	...	...	3	—
Other conditions (Non-T.B.)	...	...	...	...	...	5	—
Eye—							
Squint	...	...	...	...	...	4	2
Other conditions	...	...	...	...	...	1	—
Ear—							
Defective Hearing	...	...	...	...	...	1	1
Otitis Media	...	...	...	...	...	2	—
Nose and Throat—							
Enlarged Tonsils	...	...	...	...	...	13	66
Adenoids	...	...	...	...	...	—	1
Enlarged Tonsils and Adenoids	...	...	...	...	...	5	16
Other Conditions	...	...	...	...	...	2	2
Enlarged Cervical Glands (Non-T.B.)	...	...	...	...	...	—	33
Defective Speech	...	...	...	...	...	1	1
Defective Teeth	...	...	...	...	...	29	—
Heart Disease—							
Anæmia	...	...	...	...	...	—	1
Lungs—							
Bronchitis	...	...	...	...	...	4	8
Other Non-T.B. Disease	...	...	...	...	...	—	4
Deformities—							
Rickets	...	...	...	...	...	12	25
Other Forms	...	...	...	...	...	3	6
Other Defects and Diseases	...	...	...	...	...	14	4
Total						116	181

Infant Mortality Rates for past Five Years.

Year.	No. of deaths.		Infant Mortality Figure.	
1933	...	64	...	49
1934	...	84	...	59
1935	...	63	...	45
1936	...	91	...	63
1937	...	94	...	61
Average for past five years		79		55

Age Incidence (1937).

Deaths under one month	...	...	...	69
Deaths over one month and under three months	...	...	...	10
Deaths over three months and under six months	...	...	...	7
Deaths over six months and under nine months	...	...	...	3
Deaths over nine months and under twelve months	...	...	...	5
Total				94
Considered preventable	...	...	...	8 or 8.5%
Considered non-preventable	...	...	...	72 or 76.6%
Considered doubtfully preventable	...	...	...	14 or 14.9%

Immunisation.

Immunisation is still offered free of charge for all children whose parents are willing to accept it. As already mentioned in the Report, a complete medical examination is offered for all children as they become three years of age, and when this proposal is submitted to parents a leaflet is sent at the same time explaining the protective value of immunisation. There are certain matters such as grievances, which remain fixed in the public memory for many years; others, such as panic and danger, are quickly forgotten. Four years ago parents were demanding that all steps possible should be taken to safeguard their children against Diphtheria and a large proportion of children were at that time protected by immunisation. These children have still a large measure of protection, but unfortunately the younger generation are not being immunised in the same numbers and consequently the risk of another epidemic is steadily increasing, for the greater the proportion of susceptibles the higher this risk becomes.

Last year of approximately 1,400 three year old children to whom immunisation was offered, only 233, or approximately one-sixth, were immunised.

Infant Nurses.

The services of two fully trained nurses are available for the nursing of sick infants in their own homes.

The record of their visits in this connection during the year is as follows :—

No. of cases attended ...	...	...	572
No. of visits paid ...	...	...	2499
TOTAL ...			3071

Public Health (Ophthalmia Neonatorum) Regulations, 1926.

Eighteen cases of Ophthalmia Neonatorum were notified during 1937, compared with 12 in the previous year. Of the 18 cases, 11 were treated in institutions, and the remaining 7 in the infants' own homes by private practitioners with the assistance of the Queen Victoria Nurses.

There was no impairment of vision in any of the cases.

Twenty cases of discharging eyes were reported by midwives on Form A during the period under review, 7 of which were subsequently notified as Ophthalmia Neonatorum.

The following figures show the notifications received during the past ten years :—

Year	No. of cases notified				
1928	22
1929	20
1930	18
1931	20
1932	14
1933	16
1934	14
1935	9
1936	12
1937	18

The Midwives Act, 1936.

The above Act came into operation during the past year. It required that all local supervising authorities should either themselves, or through the medium of voluntary organisations, provide a domiciliary midwifery service adequate for the needs of the areas represented. The staff of the Queen Victoria Nursing Association were already carrying out very efficiently approximately two-thirds of all the midwifery work of the Borough, and as that body undertook to be responsible for all the midwifery work required under the Act, their offer to do so was readily accepted. In consideration of the increased services rendered, the Corporation agreed to make an additional grant to the Association of £700 per annum; this sum is to be revised at a later date if the extent of the work carried out suggests that some alteration is advisable. In this way the requirements of an important Act, introducing the equivalent of a State Midwifery Service, were put into operation with so little disturbance of existing arrangements that the public generally have not been aware that any change has taken place.

In addition to those midwives employed by the Queen's Association and those employed in institutions, there were 24 independent midwives who notified the Medical Officer of Health of their intention to practise midwifery in the area during the year. The majority of these attend only a very few cases each year and a large proportion will no doubt soon cease to practise when they find that their incomes gained from midwifery will not justify the expenditure which will be necessary in connection with refresher courses.

The Act gave power to authorities to require midwives who had become incapable by reason of age, or infirmity, to surrender their certificates. In such cases the midwives concerned were entitled to compensation equivalent to five years' earnings. Three of the midwives practising in the area were known to the Department to fall under this classification and the Maternity and Child Welfare Committee decided that they should be dealt with according to the provisions of the Act. It was believed that this procedure was in the interests of the maternity service of the district and also to the advantage of the midwives concerned for the compensation to be paid appeared generous. Two of the midwives appealed, however, to the Ministry of Health against this decision and their appeals were allowed. It was curious to find that almost immediately afterwards one of the midwives concerned applied for permission to surrender her certificate voluntarily. By her action she deprived herself of two-fifths of the compensation to which she would in the first place have been entitled, for in accordance with the provisions of the Act she could receive for voluntary surrender the equivalent of only three years' takings. In addition to this midwife, two others, who were in private practice, surrendered their certificates voluntarily and received the appropriate compensation.

Supervision of Midwives.

The supervision of midwives is carried out by the five Assistant Medical Officers who are employed by the Maternity and Child Welfare Committee, each Medical Officer being responsible for the work of her own area. In connection with this they made 62 routine inspections (including 8 visits to the Queen Victoria Nurses' Association) during the year and had nothing to report as unsatisfactory.

During the year 62 midwives notified the Medical Officer of Health of their intention to practise midwifery in the Borough.

Of the 62

24 were in private practice ;

27 were resident in institutions ;

11 were attached to the Queen Victoria Nurses' Association.

C.M.B. Forms completed by Midwives.

Form A.	Medical Help...	...	...	...	282
„ B.	Deaths of Infants	...	...	...	—
„ C.	Stillbirths	...	...	...	31
„ D.	Laying out the dead	...	...	...	—
„ E.	Liability of infection	...	...	...	—
„ F.	Artificial Feeding commenced	...	...	...	10

Compensation to Midwives for loss of work.

No claims were made under the Midwives and Maternity Homes Act, 1926, Section 2, during the year. This Section provides that a midwife who has been suspended from practice in order to prevent the spread of infection may claim compensation from the Local Authority. Compensation was paid, however, in a few cases where the midwives, through no fault of their own, had been unable to obtain any payment for their services.

A payment of 10/- is made in cases where a midwife has been booked to attend a confinement but, owing to some abnormality being discovered, the mother is admitted to hospital for treatment and the midwife loses her case. Also cases occur where no Maternity Benefit is available, and the midwife is then unable to receive even a portion of her usual fee. In cases of this kind a minimum fee of 15/- is guaranteed.

Eighteen claims for payment in such circumstances were approved during the year.

Institutional Provision for Mothers or Children.

St. Katherine's Hostel, 10, King's Mill Lane, Huddersfield, under the Huddersfield Ruridecanal Association for Preventive and Rescue Work, is an institution of this kind. It is maintained by voluntary subscriptions.

The Poor Law institution transferred to the Local Authority also provides accommodation at St. Luke's Hospital.

Homeless children, and children neglected by their parents, are received at St. Luke's Hospital, the Children's Homes at The Leas, Scholes, and the Children's Home at Springwood Hall.

The Leas, Scholes, was taken over by the West Riding County Council on the 1st June, 1937, but Borough cases are still admitted there under an agreement with the West Riding County Council.

ORTHOPÆDIC TREATMENT.

The outlines of the scheme for the provision of orthopædic treatment have been described in previous Reports. The orthopædic surgeon holds a session at the Central Clinic every fortnight, and at it, children of school age and those under five years of age are dealt with alike. A statistical statement showing the work done has already been given in the School Medical Report. The following list shows the cases dealt with amongst children under five years of age, and the attendances made by them during the year :—

Orthopædic Clinic, 1937.

ATTENDANCES OF CHILDREN UNDER 5 YEARS OF AGE.

Cause of Defect	Type of Defect	New Cases	Total Attendances
Congenital ...	Spastic Paraplegia ...	4	7
	Spastic Hemiplegia ...	5	9
	Dislocation of Hip ...	2	3
	Torticollis ...	4	6
	Talipes equino varus	2	4
	Spina Bifida ...	1	2
	Deformity of Foot ...	1	3
	Deviation of Neck ...	1	1
Acquired condition :			
Rickets ...	Genu Varum ...	13	25
	Genu Valgum ...	14	32
Postural ...	Kyphosis ...	3	3
	Pes Planus ...	12	17
Osteomyelitis	Knock Knee ...	1	3
Other ...	Overlapping Toes ...	1	1
	Deformity of Toes ...	3	4
	Eversion of Feet ...	1	2
	Semi-membranosus		
	Bursitis ...	1	2
	Defect suspected but nothing abnormal discovered ...	1	3
TOTALS ...		70	127

Treatment recommended :—

No. of Cases

Admission to Huddersfield Royal Infirmary for operative treatment ...	1
Out-Patient treatment (massage and exercises)	8
X-ray examination ...	3
To wear irons ...	3
Cod liver oil ...	18
Crooked Heels ...	9
Ultra-Violet Light Treatment ...	2
Massage and exercises at home ...	9
Treatment by medication ...	1

Cases discharged during the year :—

No.	Type	Severe or Slight	Treatment	Condition on Discharge Cured
1.	Dislocation of Hip	Slight	Reduction at Huddersfield Royal Infirmary	„
2.	Torticollis ...	„	Stretching at Huddersfield Royal Infirmary	„
3.	„ ...	„	„	„
4.	Genu Varum ...	Severe	Osteoclasis at Huddersfield Royal Infirmary	„
5.	Pes Planus ...	Slight	Crooked Heels ...	„
6.	„ ...	„	Exercises at Huddersfield Royal Infirmary and Crooked Heels	„
7.	„ ...	„	Haliveroil & Crooked Heels	„

NURSING HOMES REGISTRATION ACT, 1927.

A list of the Nursing and Maternity Homes in the Borough has already been given in this Report. Those under private management have been registered in accordance with the Nursing Homes Registration Act, 1927, and their supervision is carried out by the Medical Officer of Health and his Assistants.

PREVENTION OF BLINDNESS.

All work in connection with the blind is carried out by the Huddersfield and District Blind Society (registered under the Blind Persons Act, 1920) and the Blind Persons Act Committee of the Corporation. Much assistance is given by both Committees and treatment, if necessary, is provided either at the Huddersfield Royal Infirmary or at the Bradford Eye and Ear Hospital.

The adoption of Section 66 of the Public Health Act, 1925, has not been considered necessary by the Blind Persons Act Committee.

CHILDREN ACT, 1908.

Infant Life Protection and Boarded-out Children Visitor :
Mrs. Edith Cook.

Infant Life Protection (under Part 1 of the Children Act, 1908, as amended by the Children and Young Persons Act, 1932).

The number of children notified under the Act and under supervision at the beginning of the year was 40.

These children are seen each month and are well cared for. In all cases the foster mothers have received the Visitor kindly and are open to take advice.

Of the 40 children referred to

- 4 attained the age of nine years and so became exempt.
- 1 was admitted to the Children's Homes, The Leas, Scholes.
- 1 was admitted to a Special School.
- 13 were transferred to the care of relatives.
- 5 left the district.
- 1 was adopted.

In this way 25 names were removed from the register during the year, whilst 23 new cases were registered, so that by the end of the year the number of names on the register was 38.

The number of visits paid in connection with this work during the year was 419.

There is still much slackness about registering children put out to nurse for payment, for although publicity has been given to the matter from time to time, the majority of people do not yet realise that registration is necessary. Breach of the regulations in this connection was discovered in several cases during the year, but legal proceedings were not resorted to, when the foster mother in each case pleaded ignorance of the Act and there was no evidence to disprove this.

Boarded-out and After Care Children.

At the beginning of the year there were 13 boarded-out children in 10 homes, including 6 West Riding cases. In addition, 3 children chargeable to the local Maternity and Child Welfare Committee were boarded-out with a relative in another area.

During the year 1 name was added to the register and 4 names removed.

2 children returned to the care of their mother.

1 child attained the age of fourteen years and commenced work—income insufficient.

1 child attained the age of sixteen years,

leaving the number under supervision at the close of the year 10 cases in 7 homes. Six of these were chargeable to the Borough Funds and 4 to the West Riding. At the end of the year 2 children were boarded-out with relatives in another area, 1 case having attained the age of sixteen years during the year.

The number of visits paid by the Visitor during the year to boarded-out children was 441, and to after care children 85. All the children were found to be well cared for, and several removed during the year to more commodious homes and better environment. All were the recipients of extra boarding-out allowance during the week of Their Majesties' Coronation, and shared in the local school festivities.

Even after they cease to be legally the responsibility of the Boarding-out Committee, the Visitor endeavours to keep in close personal touch with those who have been under her care, and it is believed that this attention is much appreciated. An example of this was given recently when a young lady of twenty-two years, an orphan, asked the Visitor to be present at her wedding and to officiate by giving her away.

Lodgings and employment have been found for 2 boys (after care children who were lately in the Children's Homes), and work, wages, home and clothing are regularly supervised after the boys return from work.

Two girls in domestic service are also supervised.

CHILDREN'S HOMES.

When the Board of Guardians was disbanded by the Local Government Act of 1929, the Children's Homes at Scholes were taken over by the Borough Council and placed under the control of the Maternity and Child Welfare Committee. At the time of this change the homes served a fairly large area of the West Riding in addition to the Borough, the accommodation being divided in the proportions of 3/10ths and 7/10ths respectively. The agreement entered into at that time with the West Riding Authority expired some time ago, and it was decided to offer the homes to that Authority at the price stated and agreed to in the valuation made in 1929. This offer was accepted and the homes were taken over by the West Riding Authority on June 1st, 1937. Under the agreement arrived at it was arranged that children under school age should be removed at once and older children as soon as new accommodation had been provided by the erection of new homes within the Borough boundary. As a temporary measure the young children were housed in the house known as Springwood Hall, which was rented from the Estate Department of the Corporation for this purpose. Later a large house, known as Field Head, Lindley, with part of the estate surrounding it, was purchased for adaptation and to provide a site for the new homes. At the time of writing, plans for altering the building and for the cottages to be erected have been sent to the Ministry of Health for approval.

At the beginning of the year the number of children in the Homes at Scholes was as follows :—

	Borough Cases		W. Riding Cases		Total
	Boys	Girls	Boys	Girls	
	31	21	16	8	76
Children admitted during the period 1st Jan., 1937, to 1st June, 1937	16	15	14	11	56
Children discharged during the period 1st Jan., 1937, to 1st June, 1937	27	26	11	3	67
No. of children in the Homes on 1st June, 1937	20	10	19	16	65

From the 1st of June no record has been kept of West Riding cases in the homes, as the homes from that date were under the direct control of the West Riding Authority. The following figures, therefore, relate to Borough cases only :—

	Boys	Girls	Total
Borough children in the Homes on 1st June, 1937	20	10	30
Children admitted June 1st to end of year	16	14	30
Children discharged June 1st to end of year	14	21	35
Borough children remaining at end of year	22	3	25

Springwood Hall.

When Springwood Hall was opened for the reception of young children on May 25th, 1937, 8 children, all under four years of age, were transferred there from the homes at Scholes. Particulars of these and of the admissions and discharges during the year are as follows :—

	Borough Cases		W. Riding Cases		Total
	Boys	Girls	Boys	Girls	
Children admitted on May 25th, 1937	2	3	2	1	8
Children admitted up to the end of the year ...	11	14	3	—	28
Children discharged up to the end of the year ...	7	14	3	1	25
At the end of the year the number was as follows	6	3	2	—	11

SANITARY CIRCUMSTANCES OF THE AREA.

Water Supply.

J. P. Beveridge, Assoc. M. Inst. C.E., Waterworks Engineer and Manager.

The consumption of water during the year is shown in the following figures :—

For Domestic Purposes ...	27.98	gallons per head per day.
For Trade Purposes ...	12.15	do. do.
Total ...	40.13	do. do.

This shows an increase of 2.57 gallons per head per day on the consumption returns for 1936, which is accounted for by the increased demand for trade purposes.

The quality of the water supplied both from a chemical and bacteriological view-point has been satisfactory, although several complaints have been received throughout the year from certain districts as to the colour of the water. These complaints are being dealt with, and during the year over 11,000 lin. yards of distribution mains throughout the area of supply have been reconditioned by the "Eric" process, which has not only improved the character of the water supplied but increased the carrying capacity of the mains. This work is being continued.

To meet the ever growing demand, 3,394 lin. yards of 6 in. and 9 in. trunk mains have been laid, and further similar works are in hand.

To cope with the increasing draw of water, an additional pressure filter shell was installed at the Hill Top (Lindley) Filter Station in May. In October an electric boosting plant at Lascelles Hall was brought into service and has resulted in a great improvement in the quantity and quality of the water supplied to the districts of Kirkheaton and Upper Hopton.

A chemical examination of the water is made every quarter, and the following analyses show the results of these examinations :—

Results expressed in parts per 100,000.

Date	Total Solid Matter dried at 212° F	Loss in Ignition	Chlorine in Chlorides	Nitrogen in Nitrates	Free Ammonia	Albuminoid Ammonia	Oxygen Absorbed in 3 minutes	Oxygen Absorbed in 4 hours	Permanent Hardness	Temporary Hardness	Total Hardness
March ...	9.52	3.48	1.55	.032	.0102	.0058	.016	.070	3.62	.63	4.25
June ...	9.52	3.16	1.52	.052	—	.0028	.012	.040	6.00	.50	6.50
September	10.34	3.08	1.19	.026	.0053	.0032	.028	.090	4.37	1.16	5.53
December	12.48	3.32	1.55	.052	.0048	.0070	.028	.114	3.25	1.75	5.00

In addition to the chemical analyses, bacteriological examinations of all the supplies have been carried out every month up to December and since that date, every fortnight, by the Manager of the Sewage Works. The samples for examination are collected from the taps of the consumers, and his report shows that on three occasions B. Coli was present in 50cc. from three of the sources of supply.

The average results of all the other examinations carried out during the year are as follows :—

No. of microbes per cc.
growing on agar at 37° C.
24 hrs. 48 hrs.

2

2

B. Coli absent in 100 cc.
expressed as a percentage

90

During the year, 8,679 lin. yards of distribution mains have been laid to supply Corporation and other housing schemes.

Sewerage.

W. Jaggar, M. Inst. C.E., Borough Engineer and Surveyor.

During the year the following extensions were made to the sewerage system :—

8,379 lineal yards of new sewers have been laid in connection with new development, as follows :—

Fanny Moor Estate	...	...	761	lin. yards.
Dryclough Estate	...	...	2,077	do.
Bracken Hall Estate (part)	...	...	2,671	do.
Bradford Road	...	...	200	do.
Lightridge Road	...	...	350	do.
Crosland Road	...	...	820	do.
Park Lane, Berry Brow	...	...	80	do.
Private Estates	...	...	1,420	do.

In addition to the above, 2,438 lineal yards of sewer reconstruction has been carried out :—

Longley sewer	...	...	1,490	lin. yards.
Newsome Road	...	...	948	do.

Also 275 lineal yards stone wall sewer at Almondbury has been demolished owing to being rat infested.

Street Scavenging.

The Borough Engineer reports that street scavenging has received constant attention throughout the year and that during the winter months the work has been continued day and night in accordance with the policy approved by the Council two years ago.

Sewage Disposal.

W. D. Scouller, M.Sc., A.I.C., Sewage Works Manager.

There have been no extensions nor important alterations to the Sewage Disposal Works during 1937.

Plans are being prepared (1937) for considerable extensions to the Works, and it is hoped to be in a position to make application to the Ministry of Health for loan sanction at an early date.

Rivers and Streams.

The subject of rivers pollution is dealt with in the West Riding by a specially constituted Rivers Board, and no action has been taken during the year by the Local Authority.

Public Cleansing.

H. Neaverson, Cleansing Superintendent.

The scheme for the conversion of tub closets to the water carriage system, commenced in the year 1925, was continued during the past year.

The number of tubs in use at the beginning of the year had been reduced to 323, but in April five new areas were added to the Borough, increasing the number of tubs by 116, making a total of 439 tubs. Of these, 36 have since been converted to water closets, leaving 403 tubs in use at the end of the year.

A grant of £10 is made for the conversion of tub closets. The scheme is being continued in the new areas, and eventually the conversions will be carried out in all cases where a sewer and water supply are available.

The numbers of conversions carried out during the year, under the scheme, were as follows :—

Privies with movable receptacles converted under Corporation Scheme :				
By Owners, under £10 scheme	...	...	...	25
Slop water closets converted :				
By Owners, under £10 scheme	...	...	...	2

The following Table shows the progress made during the last five years and the numbers of closets, etc., of various types in use at the close of the year :—

TABLE XI.

	1933	1934	1935	1936	1937
Number of clean water closets, including trough closets	31,405	32,469	33,569	34,587	37,079
Number of waste water (slop) closets	125	120	119	115	113
Number of tub closets ...	492	437	332	323	403
Number of tubs in use ...	546	485	346	337*	421*
Number of ashpits in use	21	21	19	19	19
Number of ashbins in use	36,128	37,451	38,582	39,763	43,439
Number of existing privy middens	51	35	26	17	163†

Closet conversions during the period 1915–1937 carried out under Sanitary Notices.

Privies with fixed receptacles converted to clean water closets	237
Privies with movable receptacles converted to clean water closets	973
Slop water closets converted to clean water closets	11

NOTE.—In every case where a sufficient sewer and water supply is available, all new closets erected must be on the water carriage system, and be flushed with clean water.

* This figure includes 78 which have been issued in place of midden privies where water or sewers are not available, also 90 which were issued to new areas.

† This figure includes 146 in new areas.

Methods of Collection and Disposal of Refuse.

The container system of refuse collection, introduced in 1935, was again continued during the past year and proved entirely satisfactory.

The containers are equipped with patent dustless tops, and when full are taken to the Destructor and exchanged for empty ones. The full containers are taken directly to the incineration plant and emptied through bottom doors. During the past year the loading capacity of the vehicles was increased to $11\frac{1}{2}$ cu. yards by the addition of one more container, making a total of three. Collection and disposal has now been completely dustless during the past three years.

During the past year the collection of refuse has been dealt with as follows :—

Weight of refuse collected	29,413 tons.
Loads of refuse collected from Cesspools	29
Refuse incinerated	28,947 tons.
Number of dust bins in use	43,439
Dust bins collected	2,118,957
Midden privies emptied	1,599

All refuse is incinerated and the heat produced is utilised for generating superheated steam, which in turn is passed directly to the adjacent Electricity Works, to be used as energy for the supply of electricity in the Borough.

The results obtained at the Destructor during the past twelve months are as follows :—

Actual Steam raised... ..	129,240,000 lbs.
Average Superheat	595°F.
Total Weight of clinker	6,983 tons.
Total Weight of dust	2,648 tons 11 cwt.
Total Weight of metal	385 tons 14 cwts.

Cleansing of Cesspools.

These are emptied into a container cart by means of a pump, and the contents of the cart are discharged into a sewer.

SANITARY INSPECTION OF THE AREA.

E. Richardson, Chief Sanitary Inspector.

A list of the inspections and of other work carried out by the Sanitary Staff during the year is given in the following tabular statement :—

TABLE XII.

REMOVAL OF NUISANCES.

Drains requiring Re-construction	...	...	...	...	29
„ „ connecting with main sewer	...	...	...	...	9
„ „ Ventilation Shafts	...	...	...	...	1
Defective Sink Pipes and Drains	...	...	...	...	88
„ Yard Drains	...	...	...	...	125
„ Cellar Drains	...	...	...	...	12
„ Eave and Fall Pipes	...	...	...	...	19
„ Roofing	...	...	...	...	11
„ Urinals	...	...	...	...	1
„ Water Closets	...	...	...	...	54
„ Woodwork or Plaster round Sinks	...	...	...	...	4
„ Floors	...	...	...	...	5
„ Plaster	...	...	...	...	8
Fall Pipes requiring Disconnecting	...	...	...	...	1
To provide Eave and Fall Pipes	...	...	...	...	1
„ Sinkstones in Houses	...	...	...	...	13
Nuisances from want of Drains	...	...	...	...	1
„ „ Choked Sewers	...	...	...	...	10
„ Water in Cellar	...	...	...	...	5
„ Street Gullies	...	...	...	...	1
„ Stagnant Water	...	...	...	...	1
„ Defective Surface of Yard	...	...	...	...	2
„ Smoke	...	...	...	...	37
„ Poultry, Pigeons and Animals	...	...	...	...	14
„ Dust and Effluvia	...	...	...	...	1
Shops requiring Warming Accommodation	...	...	...	...	2
„ „ Washing	...	...	...	...	4
„ „ Accommodation for Meals	...	...	...	...	2
Offensive Accumulations	...	...	...	...	24
„ Ashpits and Privies	...	...	...	...	5
Closets requiring Lime Washing	...	...	...	...	1
Old Privies requiring alteration to tub or w.c. system	...	...	...	...	60
Tub Closets requiring conversion to w.c. system	...	...	...	...	3
Tipler	...	...	...	...	2
Insufficient Closet Accommodation	...	...	...	...	25
Houses requiring Cleansing	...	...	...	...	11
„ requiring Ventilation	...	...	...	...	3
„ Damp	...	...	...	...	22
„ requiring Water Supply	...	...	...	...	3
Bakehouse requiring Lime Washing or Cleansing	...	...	...	...	1
Workshops requiring Ventilation	...	...	...	...	1
Total	...	...	...	...	622

TABLE XIII—SUMMARY.

	1st Quarter.	2nd Quarter.	3rd Quarter.	4th Quarter.	TOTAL
No. of Premises where Notifiable diseases have occurred	194	140	115	163	612
Do. inspected do. do.	115	115	103	126	459
Do. disinfected do. do.	96	81	68	86	331
Do. flushed do. do.	42	29	18	17	106
Do. visited searching for fever	154	180	168	154	656
Number of re-visits where cases are isolated at home	9	13	12	14	48
Do. houses visited for Zymotic or other particulars	48	54	30	63	195
Total number of visits to infected houses	307	328	278	317	1230
Cases removed to Hospital	127	114	98	114	453
Number of Articles disinfected	2700	2747	2350	1938	9735
Number of premises flushed by request of owners (paid for)	130	181	157	122	590
Other premises, yards or courts flushed	87	61	97	111	356
Drains found choked by Flushers	256	266	269	221	1012
Drains made clear	238	241	254	199	932
Nuisances reported to Public Health Department ...	100	116	131	111	458
Do. inspected	100	116	131	111	458
Inspection of premises where nuisances are found ...	103	171	119	131	524
Do. premises where no nuisances are found...	289	263	355	350	1257
Do. premises where offensive trades are conducted	22	22	21	23	88
Do. Houses let in lodgings	9	2	12	1	24
Do. Common Lodging Houses	7	3	1	7	18
Do. Workshops	18	10	10	13	51
Do. Factories	20	20	2	2	44
Do. Schools	—	11	—	2	13
Do. Slaughter Houses	191	210	213	224	838
Do. Canal Boats	—	6	15	26	47
Do. Dairies and Milkshops	18	26	13	26	83
Do. Bakehouses	11	219	4	205	439
Do. Markets and Shops	301	377	400	389	1467
Do. Under Merchandise Marks Acts	79	133	138	103	453
Do. Van Dwellings	195	9	113	—	317
Re-visits to work in progress	179	275	267	366	1087
Visits to property under notice	1290	1570	1050	1192	5102
Total number of Inspections of Premises	2732	3327	2733	3060	11852
No. of Entries in Report Book	97	149	112	115	473
Preliminary Notices to Owners	51	59	35	50	195
Number of Legal Notices issued for abatement or abolition of nuisances	27	24	20	26	97
Owners seen personally	148	232	131	150	661
Sections of New Drains tested	13	11	13	19	56
Do. and satisfactory at first test	13	11	13	19	56
Old Drains tested	21	24	20	17	82
Do. and found sound	9	12	10	5	36
Do. and found defective	12	12	10	12	46
Smoke observations taken	182	226	173	189	770
Number of visits under Food and Drugs Acts ...	134	161	124	175	594
Food and Drugs—samples purchased	84	101	80	118	383
Do. do. adulterated	1	1	3	—	5
Water Samples taken for Analysis	—	2	—	—	2
Do. polluted	—	1	—	—	1
Number of visits under Fertilizers and Feeding Stuffs Acts	—	—	—	2	2
Number of Samples procured	—	—	—	1	1
Do. found adulterated	—	—	—	—	—
Milk Samples for Bacteriological Examination ...	98	107	64	92	361
Water Samples do. do.	—	1	—	—	1
Mussels	1	—	—	—	1

Premises and Occupations which can be controlled by Bye-Laws and Regulations.

1. Houses let in Lodgings.

This class of house is subject to inspection and registration under regulations contained in the Huddersfield Improvement Act, 1871.

The short tabular statement given below shows the number of houses let in lodgings on the Register at the beginning of the year ; the number of such houses removed from the Register, and the number remaining on the Register.

Houses let in lodgings on Register January 1st, 1937	...	69
Houses removed from Register during the year 1937	...	5
„ added to	„ „ „	2
Net decrease to Register during the year 1937	... ..	3
Houses remaining on the Register on December 31st, 1937		<hr/> 66 <hr/>

Of the above houses, 62 are in the Central District of the Borough, and 4 in the outer districts.

The 66 houses afford accommodation for 582 lodgers in 287 rooms, giving an average of 2.03 persons per room.

2. Offensive Trades.

The number of premises on the Register of Offensive Trades is 8, in which the following trades are carried on :—

Soap Boiling	...	...	...	...	1
Tripe Boiling	...	...	...	...	6
Fat Melting	...	...	...	...	7
Bone Boiling	...	...	...	...	1
Gut Scraping	...	...	...	...	1
Number of inspections during year	...				88

The whole of the premises are kept in compliance with the Bye-Laws, and no contravention was discovered during the year.

FACTORIES, WORKSHOPS, WORKPLACES, AND HOME WORK.

1.—INSPECTION.

Including Inspections made by Sanitary Inspectors.

Premises.	Number of		
	Inspections.	Written Notices.	Prosecutions
Factories (Including Factory Laundries)	44	58	—
Workshops (Including Workshop Laundries)	489	3	—
Workplaces	—	—	—
Total	533	61	—

2.—DEFECTS FOUND.

Particulars	Number of Defects.			Number of Prosecutions
	Found.	Remedied.	Referred to H.M. Inspector	
<i>Nuisances under the Public Health Acts* :—</i>				
Want of cleanliness	2	2	—	—
Want of ventilation	1	—	—	—
Overcrowding	—	—	—	—
Want of drainage of floors	—	—	—	—
Other nuisances, including emission of black smoke	34	25	—	—
Sanitary accommodation {	insufficient	5	5	—
	unsuitable or defective	11	11	—
	not separate for sexes	4	4	—
<i>Offences under the Factory and Workshop Act :—</i>				
Illegal occupation of underground bakehouses (S. 101)	—	—	—	—
Breach of special sanitary requirements for bakehouses (SS. 97 to 100)	—	—	—	—
Other offences, including escape in case of fire— (Excluding offences relating to out-work which are included in Part 3 of this Report).	—	—	—	—
Total	57	47	—	—

* Including those specified in Sections 2, 3, 7, and 8 of the Factory and Workshop Act, 1901 as remediable under the Public Health Acts.

3.—HOME WORK.

Class.	Number of		
	Lists.	Out-workers	
		Con-tractors.	Workmen
List of Outworkers (S. 107) :—			
List received from Employers twice per year	—	—	—
„ „ „ „ once „ ...	1	—	14
Prosecutions		—	
Outwork in unwholesome premises (S. 108) ...			
Cases of infectious diseases notified in home workers' premises	}	Nil.	
Orders prohibiting homework in infected premises (S.110)			

4.—REGISTERED WORKSHOPS.

Workshops on the Register (S. 131) at the end of the year.

Important classes of workshops, such as workshop bake-houses, may be enumerated here.	Clothing and similar trades	116
	Leather „	68
	Iron and Tin „	75
	Wood „	45
	Lead and Paint „	53
	Jewellery „	14
	Bakehouses	134
	Miscellaneous Trades and Manufactures	102
	Total number of Workshops on Register	607

5.—OTHER MATTERS.

Matters notified to H.M. Inspector of Factories :—

Failure to affix Abstract of the Factory and Workshop Acts (S. 133, 1901)		—
Action taken in matters referred by H.M. Inspector as remediable under the Public Health Acts, but not under the Factory and Workshop Acts (S. 5, 1901)	Notified by H.M. In-spector	10
	Reports (of action taken) sent to H.M. In-spector	10
Other		—
Underground Bakehouses (S. 101) :—		
Certificates granted during the year		—
In use at the end of the year		3

CLASSIFIED LIST OF WORKSHOPS.

	On Register Dec. 31st, 1936		Added during 1937.		Removed during 1937.		Remaining Dec. 31st, 1937.	
	Central District.	Outer Districts.	Central District.	Outer Districts.	Central District.	Outer Districts.	Central District.	Outer Districts.
1 Dress and Mantle Makers and Milliners, Tailors, Waterproof Manufacturers, &c.	95	41	2	—	28	2	69	39
2 Boot and Shoe Makers, Cloggers, Saddlers and Curriers	24	54	—	—	9	1	15	53
3 Black, Shoeing, Tin, and White Smiths; Cycle Repairs, &c.	46	36	—	—	6	1	40	35
4 Joiners, Cabinet Makers, Wood Carvers, Picture Framers and Gilders	19	24	—	—	4	1	15	23
5 Plumbers, Painters and French Polishers	34	24	—	—	5	—	29	24
6 Coopers, Carriage Builders, and Wheelwrights	2	5	—	—	—	—	2	5
7 Watchmakers, Jewellers, Engravers, and Electrical Engineers	11	3	—	—	—	—	11	3
8 Rug Makers and Rag and Wool Sorters	15	3	—	—	5	—	10	3
9 Upholsterers, Basket and Brush Makers	17	6	2	—	5	—	14	6
10 Hosiery Knitters, Shirt Makers, and Laundries	3	5	1	—	—	1	4	4
11 Monumental Sculptors	1	4	—	—	—	—	1	4
12 Organ Builders, Piano Repairers, &c.	4	—	—	—	1	—	3	—
13 Tripe Dressers	6	—	—	—	—	—	6	—
14 Bakehouses	35	95	—	12	2	6	33	101
15 Manufacturing Chemists; Mattress, Corset, Blind, and Waggon Cover Makers; Wire Workers, Tea Packers, Teazle Trimmers, Rope Makers, Tallow Chandlers, &c., &c.	44	19	3	—	11	—	36	19
	356	319	8	12	76	12	288	319
	675		20		88		607	

CANAL BOATS ACTS, 1877 and 1884.**Public Health Act, 1936.****Huddersfield Registration District.**

(1). Arrangements made for the inspection of boats, the name, address, and remuneration of the Inspector.

Ernest Richardson, Public Health Department, Huddersfield, was appointed Inspector of Canal Boats on the 10th day of October, 1917, and the remuneration for the work is included in his salary as Sanitary Inspector.

(2). The number of boats inspected during 1937, was 16, and of inspections 44.

The 16 boats were made up of 1 broad boat and 15 fly boats, the last being all broad boats.

The place of registry in all cases was Goole. All the boats inspected were found in good condition and conforming to the Acts and Regulations, and the occupants of all the boats were in good health.

(3). Infringement of the Acts and Regulations with respect to the following matters :—

(a) Registration.—None.

(b) Notification of change of master.—None.

(c) Masters without certificates.—None.

(d) Marking.—None.

(e) Overcrowding.—None.

(f) Separation of sexes.—None required.

(g) Cleanliness.—None.

(h) Ventilation.—Nothing to complain about.

(i) Painting.—None.

(j) Provision of water casks.—All boats provided.

(k) Removal of bilge water.—This work received regular attention.

(l) Notification of infectious diseases.—None.

(m) Admittance of Inspector.—No difficulty experienced.

(4). Legal proceedings taken.—None.

(5). Any other steps taken to secure compliance with the Acts and Regulations.—None.

Matters of cleanliness of minor moment have received prompt attention at the instigation of the Inspector.

(6). Infectious diseases.—None.

(7). Detention of boats.—None.

(8). (a) Number of boats on the Register.—10.

Number of boats in use or available.—10.

Propelled by motor.—None.

(b) Number of boats that cannot be traced.—None.

(9). Number registered during 1937.—None.

CANAL BOATS ACTS, 1877 AND 1884.

Summary Appendix to the Annual Report of the Canal Boats
Inspector for the year 1937.

	1935	1936	1937
Number of boats inspected	16	14	16
Made up of Broad Boats	1	1	1
Broad Fly Boats	15	13	15
Narrow Boats ..	—	—	—
Narrow Fly Boats	—	—	—
Registered Accommoda- tion—Aft Cabin ..	53½	45	55½
Centre Cabin ..	—	—	—
Fore Cabin ..	48	42	54
	101½	87	109½
Population found on board			
Adults	39	34	39
Children	2	3	3
	41	37	42
Children under school age	2	3	3
Number of children of school age	None	None	None
Number of days on which inspections have been made	13	13	19
Number of inspections made	36	40	44
Number of boats conform- ing to Acts and Regula- tions	16	14	16
Number of boats with one or more infringe- ments	None	None	None
Number of infringements met with	None	None	None
Number remedied ..	None	None	None
Number dealt with by magistrates	None	None	None
Number still under Notice December 31st	None	None	None
Number service affected..	None	None	None

SHOPS ACT, 1934.

The following tabular statement summarises the action taken under the above Act during the year :—

Nature of Defect				Found	Remedied
Defective W.C.'s	...	...	...	4	4
Dirty W.C.'s	...	...	...	1	1
Insufficient W.C.'s	...	...	...	4	4
No W.C.	...	...	...	2	2
Defective washing accommodation	...	...	...	2	2
No washing accommodation	...	...	...	5	5
Accumulation of refuse	...	...	...	8	8
Choked and defective drains	...	...	...	16	16
No warming accommodation	...	...	...	2	2
No accommodation for taking meals				1	—
TOTAL				45	44

SMOKE ABATEMENT.

1937.	Number of Observations taken.	Number shewing no Black Smoke.	Number shewing Black Smoke.	Number of cases in which the permitted number of two or three minutes was exceeded.*	Total minutes of Black Smoke emitted.	Average number of minutes of Black Smoke emitted from chimneys per half-hour.
January	48	24	24	—	34 $\frac{3}{4}$	1.447
February	75	42	33	4	74	2.242
March	54	32	22	2	46	2.090
April	67	38	29	10	81	2.793
May	61	35	26	4	54 $\frac{3}{4}$	2.105
June	100	63	37	—	42	1.135
July	73	47	26	1	45	1.730
August	53	33	20	2	39 $\frac{1}{2}$	1.975
September	49	38	11	—	11 $\frac{1}{2}$	1.045
October	58	39	19	5	39 $\frac{1}{2}$	2.078
November	62	48	14	1	21	1.5
December	70	55	15	—	14	0.933
TOTAL ...	770	494	276	29	503	1.822

*On April 1st, 1937, a new Bye-Law came into operation reducing the time limit of black smoke per half-hour's observation from three minutes to two minutes.

The number of observations in which the limit in half-an-hour was exceeded represented 3·7% of the total number of observations taken. This compares with 4·6% in 1936.

SWIMMING BATHS AND POOLS.

There are three public baths owned and controlled by the Corporation Baths Committee.

Cambridge Road Baths.

A modern building; the equipment includes two swimming pools, twenty-one slipper baths, with a medical baths department containing foam baths, &c., and artificial sunlight apparatus.

Ramsden Street Baths.

One swimming pool, which is used during school hours by the Education Committee for the teaching of swimming to school children. After school hours the bath is open to the public.

Lockwood Baths.

A smaller establishment with one swimming pool and twenty-four slipper baths. The swimming pool is used mainly by the school children from the Borough schools and from schools under the West Riding Education Authority.

All the swimming baths under the control of the Baths Committee have up-to-date filtration plants with sterilizing apparatus. The circulation period of filtration is four hours and sterilization is carried out by means of chlorine, the content of which is maintained at from .2 to .5 parts per million.

Samples of water from each of the public baths were taken for bacteriological examination at a time when the baths were being most used and all proved satisfactory. Full details of the examinations and of the results obtained are given in Appendix A of this Report.

There are no privately owned swimming baths or pools open to the public in the Borough.

ERADICATION OF BED BUGS.

- | | | |
|---------|---|-----|
| (1) (a) | Number of Council houses found to be infested ... | 16 |
| | Number of Council houses disinfested ... | 16 |
| (b) | Number of other houses found to be infested ... | 69* |

* All these houses are being dealt with under the Housing Acts.

(2) METHODS EMPLOYED FOR FREEING INFESTED HOUSES.

The infested houses are fumigated with sulphur or sulphur compound candles, the premises having been prepared by having the paper stripped from the walls, woodwork eased off the walls, and the premises sealed.

Slight infestations are dealt with by spraying with an insecticide.

(3) METHODS EMPLOYED FOR FREEING THE BELONGINGS OF TENANTS BEFORE REMOVAL TO COUNCIL HOUSES.

Before transfer to new houses, the whole of the household effects, with the exception of bedding, belonging to tenants from slum clearance properties are treated with hydrogen cyanide gas. All bedding is passed through the steam disinfecter.

In the early stages fumigation by cyanide gas was carried out by a contractor in a special van provided by him, but the new hydrogen cyanide gas fumigation plant erected by the Council came into operation about the middle of the year.

Furniture is collected from the condemned houses, packed into the van in the morning, and taken to the fumigation plant. There the van is sealed up, warm air is introduced to raise the temperature, and later cyanide gas is admitted from the plant in a manner which renders the process as safe as it possibly can be made. The contents are kept in contact with the gas for two and a half hours, after which warm air is blown through for two hours. Before removal from the station, tests are made to ascertain that the gas has been cleared away. After a sufficient airing, the furniture is delivered to the new house in the evening or late afternoon of the same day on which it was collected.

Houses on the new estates are visited periodically and instruction is given to those tenants who do not appear to have responded to the new conditions by displaying a higher standard of cleanliness in their homes.

SCHOOLS.

The sanitary condition of the schools and the action taken with regard to the prevention of the spread of infectious diseases has already been reported upon in the School Medical Report for the year.

RAG FLOCK ACTS, 1911 AND 1928.

There are now no premises dealing with rag flock, and so it was not found necessary to take any action under the Acts during the year 1937.

HOUSING.

The following list shows the number of houses erected by the Corporation and those in course of erection since 1914 :—

LIST OF HOUSES ERECTED BY THE CORPORATION.

				Erected.	In course of erection.	
1914	...	...	...	94	...	—
1915	...	...	...	70	...	—
1916	...	...	...	10	...	—
1917	...	...	...	—	...	—
1918	...	...	...	—	...	—
1919	...	...	...	26	...	—
1920	...	...	...	77	...	—
1921	...	...	...	98	...	—
1922	...	...	...	99	...	—
1923	...	...	...	94	...	—
1924	...	...	...	69	...	—
1925	..	...	...	118	...	—
1926	...	...	...	110	...	—
1927	...	...	...	154	...	—
1928	...	...	...	314	...	—
1929	...	...	...	329	...	—
1930	...	...	...	250	...	—
1931	...	...	...	370	...	—
1932	...	...	...	106	...	—
1933	...	...	...	240	...	—

				Erected.	In course of erection.	
1934	...	...	...	26	...	—
1935	...	...	...	110	...	—
1936	...	...	...	284	...	—
1937	...	...	...	439	...	701
Houses erected in added areas since 1914 now transferred to the Corporation				...	174	...
Total				...	3,661	701

HOUSING CONDITIONS.

Statistics.—Year ended 31st December, 1937.

(1)	Estimated Population	...	...	...	...	...	123,030
(2)	General death-rate	...	...	...	...	...	14 28
(3)	Death-rate from Tuberculosis	...	...	...	...	...	0.63
(4)	Infantile mortality	...	...	...	...	...	61
(5)	Number of dwelling-houses of all classes	...	...	...	...	...	39,307
(6)	Number of working-class dwelling-houses (including 2333 working-class dwelling-houses in added areas)	...	...	...	...	...	32,953
(7)	Number of new working-class houses erected	...	...	...	...	...	862

Number of New Houses erected during the Year :—

Total—

(i)	By the Local Authority	...	...	...	...	439
(ii)	By other bodies and persons	...	...	...	...	444

1. Inspection of Dwelling-houses during the Year :—

(1)	(a)	Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	...	...	...	...	4562
	(b)	Number of inspections made for the purpose	...	...	...	...	4562
(2)	(a)	Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1932	...	...	...	...	4562
	(b)	Number of inspections made for the purpose	...	...	...	...	4562
(3)		Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	...	...	...	...	4562
(4)		Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	...	...	...	...	None

2. Remedy of Defects during the Year without Service of Formal Notices :—

	Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers	None
--	---	-----	-----	-----	-----	-----	------

3. Action under Statutory Powers during the Year :—

A—Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936 :

- | | | |
|-----|--|------|
| (1) | Number of dwelling-houses in respect of which notices were served requiring repairs | None |
| (2) | Number of dwelling-houses which were rendered fit after service of formal notices :— | |
| | (a) By owners | None |
| | (b) By Local Authority in default of owners | None |

B—Proceedings under Public Health Acts :—

- | | | |
|-----|---|------|
| (1) | Number of dwelling-houses in respect of which notices were served requiring defects to be remedied | None |
| (2) | Number of dwelling-houses in which defects were remedied after service of formal notices :— | |
| | (a) By owners | None |
| | (b) By Local Authority in default of owners | None |

C—Proceedings under Sections 11 and 13 of the Housing Act, 1936 :—

- | | | | | | |
|-----|---|-----|-----|-----|-----|
| (1) | Number of dwelling-houses in respect of which Demolition Orders were made | ... | ... | ... | 151 |
| (2) | Number of dwelling-houses demolished in pursuance of Demolition Orders | ... | ... | ... | 34 |

D—Proceedings under Section 12 of the Housing Act, 1936 :—

- | | | | | | | | | |
|-----|---|-----|-----|-----|-----|-----|-----|------|
| (1) | Number of separate tenements or underground rooms in respect of which Closing Orders were made | ... | ... | ... | ... | ... | ... | 7 |
| (2) | Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit | ... | ... | ... | ... | ... | ... | None |

4. Housing Act, 1936, Part IV.—Overcrowding.

No. of houses known to be overcrowded at the beginning of the year	1,339
--	-----	-----	-----	-----	-----	-----	-------

No. of houses found to be overcrowded by routine inspection during the year	164
---	-----	-----	-----	-----	-----	-----

Cases of overcrowding which have been relieved during the year—

- | | | | | |
|--|-----|-----|-----|-----|
| (1) In Corporation houses | ... | ... | ... | 22 |
| (2) (a) In the course of slum clearance operations | | | | 92 |
| (b) Other cases | ... | ... | ... | 252 |

[illegible]

Of these, 292 are houses included in the slum clearance programme.

TABLE XIV.

HOUSING ACTS, 1925 to 1936.—Report on Work done from May 1st, 1911, to December 4th, 1937.

Year.	No. of inspections from month to month.	No. of houses re-inspected.	No. of defects found.	No. of houses involved.	No. of defects remedied without notice.	No. of defects remedied under P.H. Act 1875 and H.T.P. Act 1909.	No. of defects remedied after letter Housing Act 1925.	No. of defects remedied after Legal Notice Housing Act 1925.	No. of defects remedied after letter Housing Act 1930	No. of defects remedied after Legal Notice Housing Act 1930	No. of defects remedied after letter Housing Act 1936	No. of defects remedied after Legal Notice Housing Act 1936	No. of defects not remedied.
1911 to 1925	3078	439	11813	3130	282	11335	—	154	—	—	—	—	42
1926	472	—	1940	453	5	—	—	1933	—	—	—	—	2
1927	405	37	937	316	—	—	24	896	—	—	—	—	17
1928	378	14	1308	340	13	—	12	1265	—	—	—	—	18
1929	501	—	2407	465	16	—	16	2371	—	—	—	—	4
1930	576	4	1703	491	15	—	127	906	—	646	—	—	9
1931	774	3	2145	676	—	—	—	—	658	1455	—	—	32
1932	686	34	1913	533	5	—	—	—	507	1358	—	—	43
1933	389	19	2168	313	—	—	—	—	130	1900	—	—	138
1934	4	1013	23240	1011	—	—	—	—	4	15349	—	—	7887
1935	613	1012	49035	1624	—	—	—	—	—	5648	—	—	43387
1936	2206	287	68772	2493	—	—	—	—	—	2220	—	—	66552
1937	4562	—	94664	4562	—	—	—	—	—	—	—	—	94664
	14644	2862	262045	16407	336	11335	179	7525	1299	28576	—	—	212795

Number of houses inspected ... 14644
Number of houses re-inspected ... 2862
Number of houses in which defects were found ... 16407
Number of houses in which no defects were found ... 1099
Number of houses in which defects were wholly remedied 7381
Number of houses in which defects were partially remedied 156
Number of houses in which none of the defects were remedied 8870

Total number of defects found ...
Total number of defects remedied ...
Percentage number of defects remedied ...
Total number of defects not remedied ...

...262045
... 49250
... 18.79
...212795

HOUSING ACT, 1936.
Slum Clearance.
Progress under Programmes.

	Houses dealt with in Clearance Areas.	Houses dealt with under Part II. of the Act, including Houses in Im- provement Areas.	Total.
Number of houses included in the total programme :—			
(1) Which have been demolished	265	81	346
(2) Which have been made fit ...	—	68	68
(3) Which have been put out of use for human habitation (in- cluding parts of buildings closed) and are not to be demolished ...	—	19	19
(4) Totals of items 1 to 3 ...	265	168	433
(5) In respect of which action is necessary but was not completed by 31st December, 1937 (including 2,048 houses to be dealt with in Clearance Areas)			7,761
(6) Total of items 4 and 5			8,194

(4) Details of Clearance Areas Represented.

No. of Area.	No. of Houses in Area.		No. of Persons to be displaced.
	As Represented.	As Confirmed.	
1	41	41	145
2	32	32	113
3	27	27	81
4	9	9	36
5	232	200	657
6	15	15	47
7	61	59	273
8	91	91	273
9	28	27	79
10	26	26	70
11	64	64	217
12	7	7	14
13	22	22	73
14	7	7	31
15	21	21	100
16	19	19	76
17	98	98	365
18	28	28	85
19	34	34	105
20	32	32	95
21	6	6	16
22	77	66	191
23	9	8	27
24	58	57	168
25	4	4	6
26	3	3	11
27	11	11	27
28	11	11	28
29	3	3	7
30	8	8	20
31	7	7	20
32	7	7	19
33	3	3	6
34	8	6	13
35	3	3	8
36	3	3	5
37	3	3	9
38	17	17	42
39	7	7	26
40	5	5	16
41	2	2	6
42	4	—	18
43	5	—	17
44	7	—	19
45	13	—	43
46	18	—	54
47	10	—	29
48	6	—	31
49	7	—	22
50	26	—	69
ADDED AREA.			
1	3	3	9
Totals	1,248	1,102	3,917

(4) Details of Clearance Areas Represented—continued.

Compulsory Purchase Orders were made in respect of areas numbered 5, 6, 7, 8, 14, 15, 17, 18 and 46. These orders include the following property as lands adjoining the area.

No. of Area.	No. of Houses.	No. of Persons to be displaced.
5	32	123
6	2	10
7	50	221
8	43	184
14	—	—
15	—	—
17	18	98
18	—	—
46	—	—
Totals	145	636

(5) Progress of Slum Clearance Programme.

Area No.	Date of Representation.	Date of Order.	Date of Enquiry.	Date of Confirmation.	No. of Houses vacated.	No. of Houses demolished.
1	13th July, 1933	20th Dec., 1933	6th Feb., 1934	11th April, 1934	41	30
2	29th Dec., 1933	18th April, 1934	30th May, 1934	13th July, 1934	32	30
3	27th July, 1934	17th Oct., 1934	4th Dec., 1934	5th Feb., 1935	27	2
4	28th Dec., 1934	17th April, 1935	No enquiry	19th June, 1935	9	9
5	1st Feb., 1935	20th March, 1935	14th May, 1935	16th Aug., 1935	230	194
6	29th Nov., 1935	18th March, 1936	24th June, 1936	6th Oct., 1936	15	—
7	29th Nov., 1935	18th March, 1936	24th June, 1936	6th Oct., 1936	52	—
8	29th Nov., 1935	18th March, 1936	24th June, 1936	6th Oct., 1936	32	—
9	29th Nov., 1935	18th March, 1936	24th June, 1936	6th Oct., 1936	27	—
10	27th Dec., 1935	18th March, 1936	24th June, 1936	6th Oct., 1936	5	—
11	27th Dec., 1935	5th Aug., 1936	27th Oct., 1936	9th Feb., 1937	41	—
12	31st Jan., 1936	18th March, 1936	24th June, 1936	6th Oct., 1936	4	—
13	31st Jan., 1936	18th March, 1936	24th June, 1936	6th Oct., 1936	22	—
14	31st Jan., 1936	5th Aug., 1936	27th Oct., 1936	9th Feb., 1937		
15	31st Jan., 1936	5th Aug., 1936	27th Oct., 1936	9th Feb., 1937		
16	28th Feb., 1936	15th April, 1936	24th June, 1936	6th Oct., 1936	19	—
17	28th Feb., 1936	20th May, 1936	30th June, 1936	12th Oct., 1936	25	—
18	29th May, 1936	5th Aug., 1936	27th Oct., 1936	9th Feb., 1937		
19	26th June, 1936	5th Aug., 1936	27th Oct., 1936	9th Feb., 1937	10	—
20	28th July, 1936	7th Oct., 1936	16th Feb., 1937	22nd April, 1937		
21	18th Sept., 1936	9th Nov., 1936	16th Feb., 1937	22nd April, 1937		
22	18th Sept., 1936	9th Nov., 1936	16th Feb., 1937	22nd April, 1937		
23	16th Oct., 1936	3rd Feb., 1937	No enquiry	4th Aug., 1937		
24	13th Nov., 1936	3rd Feb., 1937	20th April, 1937	4th Aug., 1937		
25	13th Nov., 1936	3rd Feb., 1937	20th April, 1937	4th Aug., 1937		
26	13th Nov., 1936	3rd Feb., 1937	20th April, 1937	4th Aug., 1937		
27	13th Nov., 1936	3rd Feb., 1937	20th April, 1937	4th Aug., 1937		
28	13th Nov., 1936	3rd Feb., 1937	20th April, 1937	4th Aug., 1937		
29	13th Nov., 1936	3rd Feb., 1937	No enquiry	4th Aug., 1937		
30	13th Nov., 1936	3rd Feb., 1937	20th April, 1937	4th Aug., 1937		
31	15th Jan., 1937	3rd March, 1937	8th June, 1937	11th Aug., 1937		
32	15th Jan., 1937	3rd March, 1937	No enquiry	11th Aug., 1937		

Area No.	Date of Representation.	Date of Order.	Date of Enquiry.	Date of Confirmation.	No. of Houses vacated.	No. of Houses demolished.
33	15th Jan., 1937	3rd March, 1937	8th June, 1937	11th Aug., 1937		
34	15th Jan., 1937	3rd March, 1937	8th June, 1937	11th Aug., 1937		
35	15th Jan., 1937	3rd March, 1937	8th June, 1937	11th Aug., 1937		
36	15th Jan., 1937	3rd March, 1937	8th June, 1937	11th Aug., 1937		
37	17th Feb., 1937	7th April, 1937	8th June, 1937	11th Aug., 1937		
38	17th Feb., 1937	7th April, 1937	8th June, 1937	11th Aug., 1937		
39	16th April, 1937	2nd June, 1937	3rd Sept., 1937	29th Nov., 1937		
40	16th April, 1937	2nd June, 1937	3rd Sept., 1937	29th Nov., 1937		
41	16th April, 1937	2nd June, 1937	No enquiry	29th Nov., 1937		
42	18th June, 1937					
43	18th June, 1937					
44	12th Nov., 1937	2nd Feb., 1938				
45	12th Nov., 1937	2nd Feb., 1938				
46	12th Nov., 1937	2nd Feb., 1938				
47	12th Nov., 1937					
48	17th Dec., 1937	2nd Feb., 1938				
49	11th Feb., 1938					
50	11th Feb., 1938					
ADDED 1	AREA : 9th Jan., 1936	10th Sept., 1936	2nd March, 1937	27th May, 1937		

ESTIMATED HOUSING PROGRAMME OF HOUSING REQUIREMENTS.

HOUSES DEALT WITH.				
Houses dealt with, now vacant	...	...	Houses built and occupied	...
	...	965		747
WORK IN HAND.				
Houses dealt with, still occupied	...	...	Houses in course of erection, not occupied	...
	...	932		634
WORK IN HAND AND FURTHER PROPOSALS.				
Houses dealt with, still occupied	...	...	Houses in course of erection, not occupied	...
	...	932		634
Properties still to be dealt with (estimated):—				
Probable Clearance Areas	...	...	Houses proposed:—	
Individual Unfit Houses	...	609	Brackenhall	...
Old Type Back to Back Houses (pairs)	...	307	Dalton	...
Underdwellings (200 of which are two-storey)	...	1,993		...
	...	659		—
	...	—	Total Houses in hand and proposed	2,531
Houses required to complete Programme	...	4,500	Further Houses required to complete Programme	1,969
				—
				4,500

81

REHOUSING UNDER SECTION 136 (B) HOUSING ACT, 1936, AND CIRCULAR No. 1539.

TYPES OF HOUSES REQUIRED BASED ON SIZES OF FAMILIES OF ALL HOUSES IN PROGRAMME.

1 Bedroom.		2 Bedrooms.		3 Bedrooms.		4 Bedrooms.		More than 4 Bedrooms.	
1 and 2 Persons.	50.57%	*3 and 4 Persons.	31.74%	Ordinary. *4 and 5 Persons.	10.56%	Ordinary. 7 Persons.	Large. 8 Persons.	9 Persons	and upwards.
Brackenhall	...	500	314	105	35	19	9	5	987
Dalton	...	462	290	97	31	17	8	5	910
Further Houses required	998	627	627	210	68	37	19	10	1,969

* It is estimated that one-third of the 4-person families includes parents, son and daughter, and require a 3-bedroom house.

INSPECTION AND SUPERVISION OF FOOD.

Milk Supply.

During the year under review the inspection of farms and dairies was carried out by the Veterinary Officer, Mr. W. R. McKinna, M.R.C.V.S., D.V.S.M., who was assisted in this work by one of the Sanitary Inspectors. Mr. McKinna's Report, which outlines the action taken during the year under the Milk and Dairies Order and the Diseases of Animals Acts, is given as an Appendix to this Report.

At the close of the year there were 132 registered cow-keepers, of whom 23 were on the roll of Accredited Producers, and there were 279 purveyors of milk.

Bacteriological Examination of Milk.

During the year the number of samples of milk examined was 383, made up as follows :—

RAW MILK.

Produced in the Borough	73
Produced out of the Borough	93
Supplied to Schools	64

ACCREDITED MILK.

Supplied to Schools	77
Other than to Schools	32

TUBERCULIN TESTED MILK	35
PASTEURISED MILK.	9

383

With the exception of the samples of Pasteurised milk, which are still examined by the Plate Count method, all samples have been examined by the Methylene Blue test as prescribed by the Milk (Special Designations) Order, 1936, and, unless the sample fulfilled the conditions of cleanliness fixed by that Order, the producers have been, in the case of producers within the Borough, visited by the Veterinary Officer and their methods examined, or in the case of producers out of the Borough, the circumstances have been reported to the Authority within whose area the milk was produced.

Raw Milk.

Of the 73 samples produced in the Borough, 53, or 72.6 per cent., passed the Methylene Blue test and also the test for B. Coli in 1/100th c.c.

Of the 93 samples produced out of the Borough, 52, or 55.9 per cent., passed the Methylene Blue test and also the test for B. Coli in 1/100th c.c.

School Supply (Raw).

Of the 64 samples of raw milk supplied to schools, 54, or 84.4 per cent., passed the Methylene Blue test and also the test for B. Coli in 1/100th c.c.

Milk (Special Designations) Order, 1936.

Accredited Milk.

One hundred and nine samples of Accredited milk were examined during the year. Seventy-seven of these samples were of milk supplied to schools, and 32 were taken from retailers in course of ordinary delivery.

Of the 109 samples, 97, or 88.9 per cent., passed both the Methylene Blue and the B. Coli tests ; of the remaining 12, 2 failed in the Methylene Blue test, 9 passed the Methylene Blue test but were found to contain B. Coli in 1/100th c.c., and 1 failed in both tests.

Of the 77 samples of Accredited milk supplied to schools, 69, or 89.6 per cent., passed both tests.

Of the remaining 32 samples, 28, or 87.5 per cent., passed both tests.

Tuberculin Tested Milk.

Thirty-five samples of Tuberculin Tested milk were examined, and of these, 32, or 91.4 per cent., were found satisfactory both by the Methylene Blue test and the test for B. Coli.

The remaining 3 samples satisfied the Methylene Blue test but were found to contain B. Coli in 1/100th c.c.

Pasteurised Milk.

Nine samples of Pasteurised milk were examined and of these, 7, or 77.7 per cent., were found to comply with the Order. Of the remaining 2 samples, 1 exceeded the bacteria content of 100,000 and 1 was found to contain B. Coli in 1/100th c.c.

Inoculation Test for Tubercle Bacilli.

During the year, 175 samples were examined by the guinea pig inoculation test for the presence of Tubercle Bacilli.

Of the 175 samples, 10 were found to contain Tubercle Bacilli, giving a percentage of 5.7.

Ninety-seven of the 175 samples were from milk produced in the Borough, and of these 97, 4 were found to contain Tubercle Bacilli, a percentage of 4.1.

The remaining 78 samples were from milk produced out of the Borough, and these, 6 were found to contain Tubercle Bacilli, a percentage of 7.6.

MEAT INSPECTION.

There are seven Private Slaughter Houses and one Knacker's Yard in the Borough, all of which are licensed. The increase in the number of Private Slaughter Houses during 1937 is due to the extension of the Borough.

	1914		Jan., 1937		Dec., 1937
Registered					
Slaughterhouses	—	...	—	...	—
Licensed					
Slaughterhouses	13	...	4	...	7

The Private Slaughterhouses are visited by the District Inspectors during the usual killing hours.

There is also a Public Abattoir, over which constant supervision is kept during killing hours.

The number of carcasses wholly or partly condemned was 118 and 635 respectively.

TABLE XV.
Carcases Wholly or Partly Condemned and Destroyed
(not including offals).

PUBLIC ABATTOIR.						OUTER DISTRICTS.			Grand Total.
Animals.			Wholly.	Partly.	Totals.	Wholly.	Partly.	Totals.	
Cows	...	...	14	4	18	—	—	—	18
Heifers	...	...	13	9	22	—	—	—	22
Bullocks	...	...	10	13	23	—	—	—	23
Calves	...	...	8	—	8	—	—	—	8
Sheep	...	...	14	1	15	—	—	—	15
Pigs	...	...	58	608	666	1	—	—	667
			117	635	752	1	—	—	753

Table XVI.
Showing Classification of Diseases and Conditions found
(not including offals).

PUBLIC ABATTOIR.								OUTER DISTRICTS		Grand Total.
Disease or Condition.	Cows.	Heifers.	Bullocks.	Calves.	Sheep.	Pigs.	Totals.	Pigs.	Totals.	
Tuberculosis	14	20	23	2	—	650	709	1	1	710
Moribund	—	—	—	4	11	3	18	—	—	18
Pyæmia	—	—	—	1	—	5	6	—	—	6
Bruising	1	1	—	—	—	1	3	—	—	3
Emaciation	—	—	—	—	3	—	3	—	—	3
Jaundice	1	—	—	—	—	1	2	—	—	2
Abscesses (Superficial)	—	—	—	—	1	2	3	—	—	3
Acute Septic Mammitis	1	—	—	—	—	—	1	—	—	1
Acute Septic Metritis	—	1	—	—	—	—	1	—	—	1
Dropsy	—	—	—	—	—	1	1	—	—	1
Pleurisy	—	—	—	—	—	1	1	—	—	1
Septicæmia	1	—	—	—	—	—	1	—	—	1
Immature	—	—	—	1	—	—	1	—	—	1
Lymphadenitis	—	—	—	—	—	1	1	—	—	1
Pleurisy and Peritonitis	—	—	—	—	—	1	1	—	—	1
	18	22	23	8	15	666	752	1	1	753

Table XVII.

The total weight of unsound or unwholesome meat and offals destroyed, was as follows :—

Beef	...	...	...	...	25,433 lbs.
Mutton	...	...	...	...	832 lbs.
Pork	...	...	...	...	18,043 lbs.
Veal	...	...	...	...	426 lbs.
Offals	...	...	...	...	30,152 lbs.
Total					74,886 lbs.

Other foods found unsound or unwholesome and destroyed.

Tinned Foodstuffs	...	...	461 tins
Rabbits	...	...	14 couples
Turnips	...	...	30 cwts.
Herrings	...	...	1 cwt.
Cockles	...	...	150 lbs.

TUBERCULOSIS ORDER, 1925.

Particulars of Cows slaughtered at the Public Abattoir under the above Order during 1937.

No. of Cows slaughtered	...	...	5
No. wholly condemned	...	...	1
No. of Offals only condemned	...	...	4
Weight of carcase condemned	...	...	582 lbs.

Carcases Inspected and Condemned.

	Cattle exclud- ing Cows.	Cows.	Calves.	Sheep and Lambs.	Pigs.
No. Killed	7,232	416	743	23,962	11,266
No. Inspected	7,232	416	743	23,962	11,266
All Diseases except Tubercu- losis					
Whole carcases condemned ...	1	4	6	14	12
Carcases of which some part or organ was condemned ...	202	2	1	160	51
Percentage of the number in- spected affected with disease other than Tuberculosis ...	2.79%	1.44%	.94%	.72%	.56%
Tuberculosis only :					
Whole carcases condemned ...	22	10	2	Nil	47
Carcases of which some part or organ was condemned ...	316	37	1	Nil	1,260
Percentage of the number in- spected affected with Tuber- culosis	4.62%	11.29%	.403%	Nil	11.6%

TABLE XVIII.

Shewing the Number of Animals Slaughtered, and also Numbers and Weights of Carcasses wholly and partly Condemned in (1) the Public Abattoir, and (2) Private Slaughter Houses.

MONTHS.	1-PUBLIC ABATTOIR.															2-PRIVATE SLAUGHTER HOUSES.									
	ANIMALS SLAUGHTERED.					CARCASSES CONDEMNED.					WEIGHT OF CONDEMNED CARCASSES					ANIMALS SLAUGHTERED.					CARCASSES CONDEMNED.		WEIGHT OF CONDEMNED CARCASSES.		
	Cattle.	Calves.	Sheep.	Pigs.	Totals.	Cattle.	Calves.	Sheep.	Pigs.	Totals.	Cattle.	Calves.	Sheep.	Pigs.	Totals.	Cattle.	Calves.	Sheep.	Pigs.	Totals.	Pig.	Totals.	Pig.	Totals.	
1937											Lbs.	Lbs.	Lbs.	Lbs.	Lbs.								Lbs.	Lbs.	
January ...	559	73	1658	793	3083	5	1	—	25	31	2244	51	—	302	2597	26	2	79	87	194	—	—	—	—	
February ...	575	80	1787	836	3278	2	—	2	71	75	1162	—	140	915	2217	23	1	65	31	120	—	—	—	—	
March ...	731	106	2051	1142	4030	6	2	1	57	66	2301	109	52	1195	3657	50	2	168	71	291	—	—	—	—	
April ...	571	61	1567	935	3134	6	1	3	62	72	2223	60	190	1286	3759	13	—	35	19	67	—	—	—	—	
May ...	528	38	1608	735	2909	4	2	4	81	91	1886	87	150	1234	3357	27	2	113	39	181	—	—	—	—	
June ...	643	41	2428	599	3711	5	1	—	30	36	2306	69	—	610	2985	49	—	142	93	284	—	—	—	—	
July ...	986	52	3807	980	5825	7	—	—	36	43	2654	—	—	1245	3899	82	1	311	73	467	—	—	—	—	
August ...						3	—	—	25	28	835	—	—	697	1532						1	1	140	140	
September	705	61	2314	1056	4136	9	—	1	52	62	4295	—	70	1841	6206	43	—	180	51	274	—	—	—	—	
October ...	568	65	1665	913	3211	4	—	3	79	86	1233	—	160	4422	5815	37	1	108	68	214	—	—	—	—	
November...	605	74	1672	898	3249	4	—	—	84	88	1678	—	—	1693	3371	59	3	202	121	385	—	—	—	—	
December	731	80	1910	1667	4388	8	1	1	64	74	2511	50	70	1797	4428	37	—	92	59	188	—	—	—	—	
Totals	7202	731	22467	10554	40954	63	8	15	666	752	25328	426	832	17237	43823	446	12	1495	712	2665	1	1	140	140	

Note :—Cows, bullocks and heifers are classified "Cattle."

FOOD INSPECTION.

FOOD AND DRUGS (ADULTERATION) ACT, 1928.

Report on Action taken under the above-named Act in the County Borough of Huddersfield during the year 1937.

1.—ARTICLES ANALYSED.

FORMAL SAMPLES.

New Milk	...	...	251	Of this number 11 were certified as adulterated
Sweet Spirits of Nitre	...		1	

INFORMAL SAMPLES.

Arrowroot	...	...	3	
Butter	...	...	3	
Bread	...	...	3	
Baking Powder	...		3	
Borax	...	...	3	
Boric Acid	...	...	3	
Beer	...	...	2	
Bi-carbonate of Soda	...		3	
Cream (fresh)	...	...	4	
Cream (tinned)	...	...	2	
Condensed Full Cream Milk	...	...	3	
Cheese	...	...	4	
Cream of Tartar	...		3	
Cocoa	...	...	3	
Coffee	...	...	3	
Cordials	...	...	1	
Cornflour	...	...	3	
Dried Fruits	...	...	2	
Dripping	...	...	3	
Drugs	...	...	8	Of this number 2 were certified as adulterated
Dried Milk	...	...	5	Of this number 2 were certified as adulterated
Epsom Salts	...	...	3	
Flour	...	...	2	
Flour (self-raising)	...		3	
Ground Ginger	...	...	3	
Golden Syrup	...	...	2	
Honey	...	...	3	
Jams	...	...	3	
Lard	...	...	3	
Lemon Cheese	...	...	2	
Margarine	...	...	3	
Marmalade	...	...	3	
Mineral Waters	...		3	
Mustard	...	...	2	
Olive Oil	...	...	2	
Oatmeal	...	...	2	
Potted Meat	...	...	2	
Potted Fish	...	...	2	
Pepper	...	...	2	
Rice	...	...	2	
Sausages	...	...	2	
Sauces	...	...	2	

Sugar	...	...	...	3
Sago	...	...	...	2
Shredded Suet	...	...	...	2
Tinned Vegetables	...	...	...	2
Tea	...	...	...	3
Vinegar	...	...	...	2
Total				383

2.—DETAILS OF SAMPLES REPORTED BY THE PUBLIC ANALYST TO BE ADULTERATED.

No.	Article.	Result of Analysis.	Proceedings.
7	New Milk	Not genuine, but contains at least 2.0% of added water.	Vendor warned by Town Clerk.
13	New Milk	Not genuine, but is deficient in fat to the extent of at least 4.0%.	Vendor warned by Town Clerk.
73	New Milk	Not genuine, but is deficient in fat to the extent of at least 41.0%.	Case heard June 11th, 1937. Defendant fined £1.
79	New Milk	Not genuine, but is deficient in fat to the extent of at least 9.0%.	Vendor warned by Town Clerk.
100	New Milk	Not genuine, but is deficient in fat to the extent of at least 2.0%.	Vendor warned by Town Clerk.
107	New Milk	Not genuine, but is deficient in fat to the extent of at least 11.0%.	Case heard July 16th, 1937. Defendant fined £2.
139	New Milk	Not genuine, but contains at least 6.0% of added water.	Case heard Sept. 6th, 1937. Case dismissed.
142	New Milk	Not genuine, but contains 1.5% of added water and is deficient in fat to the extent of at least 20.0%.	Case heard Aug. 28th, 1937. Judgment postponed. Oct. 8th 1937 — Case dismissed.
68	Sweet Spirits of Nitre (Informal)	The strength of the spirit does not fall within the limit laid down in the British Pharmacopœia.	Formal sample taken (see sample No. 145).
145	Sweet Spirits of Nitre (Formal)	In order to comply with the requirements of the British Pharmacopœia, Spiritus Ætheris Nitrosi or Sweet Spirit of Nitre should contain not less than and not more than 1.25% and 2.5% W/V respectively. Judged by this standard, the sample is deficient to the extent of at least 12.0% and is unsatisfactory.	Vendor warned by Town Clerk.

No.	Article.	Result of Analysis.	Proceedings.
71	Dried Full Cream Milk (Informal)	Under the Public Health (Dried Milk) Regulations, 1923, a Dried Full Cream Milk should contain 26.0% Milk Fat. Having found in the sample only 24.4% of Milk Fat, and having regard to the above Regulations, the sample is unsatisfactory.	Formal sample taken (see sample No. 150).
150	Dried Full Cream Milk (Formal)	24.5% of fat found. Having regard to the Public Health (Dried Milk) Regulations, 1923, the sample is deficient in fat and is unsatisfactory.	Vendor warned by Town Clerk.
223	New Milk	Not genuine, but contains at least 2.5% of added water.	Vendor warned by Town Clerk.
227	New Milk	Not genuine, but contains at least 1.0% of added water.	Vendor warned by Town Clerk.
249	New Milk	Not genuine, but is deficient in fat to the extent of at least 6.0%.	Vendor warned by Town Clerk.

3.—OFFENCES OTHER THAN ADULTERATION.—None.

4.—LEGAL PROCEEDINGS.

Date.	No. of Sample.	Offence Charged.	Name of Defendant.	Result.
June 11th, 1937	73	Selling New Milk from which had been abstracted at least 41.0% of its fat	W. B.	Fined £1.
July 16th, 1937	107	Selling New Milk from which had been abstracted at least 11.0% of its fat	H. W. B.	Fined £2.
Sept. 6th, 1937	139	Selling New Milk to which had been added at least 6.0% of water	W. B. for M. E.	Case dismissed.
Oct. 8th, 1937	142	Selling New Milk from which had been abstracted at least 20.0% of its fat and to which had been added at least 1.5% of water	A. R. for G. T. H.	Case dismissed.

FOOD EXAMINATION.

The chemical examination of food is carried out in the laboratory of the Public Analyst, the bacteriological examination in the Public Health Department or at the Bacteriological Department of the Royal Infirmary, depending upon the nature of the examination required.

TABLE XIX.
CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE 52 WEEKS ENDED 1st JANUARY, 1938.

NOTIFIABLE DISEASES.		CASES NOTIFIED IN WHOLE DISTRICT.														Total Cases notified in each Township.						No. of Cases Treated in Hospital from each Township.						Total Cases Treated in Hospital.					No. of Deaths.						
		At All Ages	AT AGES—YEARS													Central	Dalton	Almondbury	Lockwood	Lindley	Moldgreen	Millsbridge	Central	Dalton	Almondbury	Lockwood	Lindley	Moldgreen	Millsbridge	Mill Hill	Royal Infirmary and Green Lea	St. Luke's Hospital	Maternity Home	Hospitals Outside District	TOTAL	Notified	Not Notified	TOTAL	
			Under 1	1—2	2—3	3—4	4—5	5—10	10—15	15—20	20—35	35—45	45—65	65—75	75 & over																								
Small-pox ...	Borough ... Non-Borough ... TOTAL ...	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —			
Cerebro-Spinal Meningitis	Borough ... Non-Borough ... TOTAL ...	2 — 2	— — —	— — —	— — —	— — —	2 — 2	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	1 1 1	1 1 1	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	1 1 1	1 1 1	— — —	— — —	— — —	2 — 2	1 — 1	— — —	— — —		
Diphtheria ...	Borough ... Non-Borough ... TOTAL ...	91 3 94	2 — 2	3 — 3	2 — 2	5 — 5	4 — 4	27 — 27	14 1 15	9 — 9	23 1 24	2 — 2	— 1 1	— — —	— — —	25 22 25	22 — 22	14 — 14	11 — 11	8 3 11	10 — 10	1 — 1	24 22 24	22 — 22	13 — 13	11 — 11	8 3 11	10 — 10	1 — 1	89 2 91	— 1 1	— — —	— — —	— — —	89 3 92	3 2 5	1 — 1	— — —	4 6 2
Erysipelas ...	Borough ... Non-Borough ... TOTAL ...	59 4 63	— — —	— — —	— — —	— — —	1 — 1	2 — 2	— — —	— — —	6 1 7	8 1 9	30 2 32	9 — 9	3 — 3	18 18 18	13 — 13	4 — 4	4 1 5	16 3 19	4 — 4	— — —	5 — 5	— — —	— — —	1 — 1	5 3 8	3 — 3	— — —	13 2 15	— 1 1	1 — 1	— — —	— — —	14 4 18	2 — 2	— — —	— — —	2 2 2
Scarlet Fever	Borough ... Non-Borough ... TOTAL ...	120 2 122	— — —	— — —	4 — 4	5 1 6	12 — 12	40 — 40	22 — 22	13 — 13	18 — 18	5 1 6	1 — 1	— — —	— — —	30 30 30	33 — 33	15 — 15	13 — 13	16 2 18	10 — 10	3 — 3	29 29 29	31 — 31	15 — 15	13 — 13	15 2 17	10 — 10	3 — 3	116 2 118	— — —	— — —	— — —	— — —	116 2 118	— — —	— — —	— — —	
Enteric Fever	Borough ... Non-Borough ... TOTAL ...	2 — 2	— — —	— — —	— — —	— — —	1 — 1	— — —	— — —	— — —	1 — 1	— — —	— — —	— — —	— — —	— — —	— — —	1 — 1	— — —	1 — 1	— — —	— — —	— — —	— — —	— — —	1 — 1	— — —	— — —	2 — 2	— — —	— — —	— — —	— — —	2 — 2	— — —	1 — 1	— — —	1 1 1	
Encephalitis Lethargica	Borough ... Non-Borough ... TOTAL ...	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	
Puerperal Pyrexia	Borough ... Non-Borough ... TOTAL ...	16 14 30	— — —	— — —	— — —	— — —	— — —	— — —	— — —	1 — 1	10 14 24	5 — 5	— — —	— — —	— — —	3 1 4	1 — 1	4 — 4	1 8 9	3 5 8	4 — 4	— — —	3 1 4	1 — 1	2 — 2	1 8 9	3 5 8	3 — 3	— — —	— — —	5 5 10	8 8 16	— — —	— — —	13 14 27	— 2 2	1 2 3	1* 4* 5*	
Puerperal Fever	Borough ... Non-Borough ... TOTAL ...	2 — 2	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	2 — 2	— — —	— — —	— — —	— — —	1 — 1	— — —	1 — 1	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	1 — 1	— — —	— — —	— — —	1 — 1	1 — 1	— — —	1 — 1	
Pneumonia	Borough ... Non-Borough ... TOTAL ...	153 — 153	7 — 7	2 — 2	3 — 3	7 — 7	7 — 7	15 — 15	6 — 6	4 — 4	20 — 20	20 — 20	34 — 34	15 — 15	13 — 13	33 33 33	31 — 31	32 — 32	19 — 19	24 — 24	10 — 10	4 — 4	8 — 8	1 — 1	1 — 1	3 — 3	3 — 3	2 — 2	2 — 2	1 — 1	8 — 8	11 — 11	— — —	— — —	20 — 20	26 — 26	56 — 56	82 — 82	
Diarrhoea (in Infants under 5)	Borough ... Non-Borough ... TOTAL ...	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	2 — 2	— — —	2 — 2
Ophthalmia Neonatorum	Borough ... Non-Borough ... TOTAL ...	15 3 18	15 3 18	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	2 2 2	5 — 5	2 — 2	3 3 6	2 — 2	— — —	1 — 1	— — —	— — —	2 — 2	2 3 5	1 — 1	— — —	1 — 1	— — —	— — —	8 3 11	— — —	— — —	— — —	8 3 11	— — —	— — —	— — —
Acute Polio-Myelitis	Borough ... Non-Borough ... TOTAL ...	1 — 1	— — —	1 — 1	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	1 — 1	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —
TOTAL ...	Borough ... Non-Borough ... TOTAL ...	461 26 487	24 3 27	6 — 6	9 — 9	17 1 18	23 — 23	86 — 86	44 1 45	27 — 27	80 16 96	40 2 42	65 3 68	24 — 24	16 — 16	113 1 114	106 — 106	73 — 73	51 12 63	71 13 84	38 — 38	9 — 9	71 1 72	58 — 58	34 — 34	31 12 43	36 13 49	28 — 28	7 — 7	222 6 228	14 7 21	29 12 41	— 1 —	— — —	265 26 291	33 4 37	61 2 63	94 6 100	

* Died from "Other Puerperal Causes."

Isolation Hospital, name and situation—Mill Hill Isolation Hospital, Dalton.
 Small Pox Hospital, name and situation—Whitehouse Farm, Dalton.

Total available beds, 194.

TABLE XXI.

Number of Notifications of Infectious Diseases
received in the years 1928 to 1937.

Disease.	1928.	1929.	1930.	1931.	1932.	1933.	1934.	1935.	1936.	1937.
Small-pox ...	117	45	76	—	—	—	—	—	—	—
Scarlet Fever ...	441	531	236	98	114	835	736	448	219	122
Diphtheria ...	264	355	286	135	116	547	492	294	181	94
Enteric Fever (including Paratyphoid) ...	15	12	9	4	5	3	3	4	4	2
Puerperal Fever ...	3	—	4	3	2	4	8	9	4	2
Puerperal Pyrexia ...	16	21	17	23	42	31	31	13	23	30
Pneumonia ...	146	210	199	214	107	170	127	159	134	153
Cerebro-Spinal Meningitis ...	1	1	4	4	4	1	3	2	1	2
Ophthalmia Neonatorum ...	22	20	18	20	14	16	14	9	12	18
Encephalitis Lethargica ...	3	4	—	5	1	—	2	—	—	—
Acute Polio-myelitis ...	2	1	1	1	3	1	2	—	—	1
Erysipelas ...	49	62	97	42	38	76	83	66	81	63
Diarrhoea (in Infants under 5 years of age) ...	4	8	7	—	6	2	5	2	1	—
Dysentery ...	—	—	—	—	—	—	—	1	1	—
Anthrax ...	—	—	—	—	—	—	—	—	—	—
Pemphigus Neonatorum ...	3	—	3	—	—	—	—	—	—	—
Malaria ...	—	—	—	—	—	—	—	—	1	—
Polio-Encephalitis ...	—	—	—	—	—	—	—	—	2	—
Pulmonary Tuberculosis ...	143	135	154	220	172	152	133	109	106	78
Other forms of Tuberculosis ...	66	78	72	63	66	62	33	39	46	47
Total ...	1295	1483	1183	832	690	1900	1672	1155	816	612

TABLE XXII.

Analysis of Notifications, 1937.

Disease.	Jan.	Feb.	Mar.	Apr.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.	Total.
Small-pox ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Cerebro-Spinal Meningitis ...	2	—	—	—	—	—	—	—	—	—	—	—	2
Diphtheria ...	7	10	17	5	9	12	3	8	4	4	6	9	94
Erysipelas ...	4	5	5	4	3	7	3	2	9	7	6	8	63
Scarlet Fever ...	6	8	14	14	7	11	9	9	9	11	10	14	122
Enteric Fever (including Paratyphoid) ...	—	—	—	—	—	—	—	—	—	2	—	—	2
Encephalitis Lethargica ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Pyrexia ...	6	1	2	1	4	—	—	2	5	6	3	—	30
Puerperal Fever ...	1	—	—	1	—	—	—	—	—	—	—	—	2
Pneumonia ...	48	13	18	11	9	5	1	4	7	10	10	17	153
Diarrhoea (in Infants under 5 years of age) ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Ophthalmia Neonatorum ...	—	1	—	—	—	4	2	5	4	—	—	2	18
Malaria ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Acute Polio-Myelitis ...	—	—	—	1	—	—	—	—	—	—	—	—	1
Pulmonary Tuberculosis ...	3	5	11	7	5	6	5	6	7	7	8	8	78
Other forms of Tuberculosis ...	3	1	3	4	6	4	3	2	6	3	6	6	47
Total ...	80	44	70	48	43	49	26	38	51	50	49	64	612

TABLE XXIII.
CASES OF OPHTHALMIA NEONATORUM
notified during the year 1937.

CASES.			Vision Unimpaired	Vision Impaired.	Total Blindness.	Deaths.
Notified.	TREATED.					
	At Home.	In Hospital.				
18	7	11	18	—	—	—

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES.

A complete list of all the cases of infectious diseases notified during the year is given in Table XIX. Included in this Table are the age and ward distribution of the cases notified, the numbers treated in hospital and the number of deaths caused by the various diseases.

This Table demonstrates, as in the previous year, the comparatively high incidence of Diphtheria and of Scarlet Fever in the five to ten age group, whilst Pneumonia and Erysipelas again claimed most victims amongst those aged forty-five to sixty-five years.

Table XX. deals with the numbers of cases of the various infectious diseases treated in the Borough Isolation Hospital, distinguishing Borough from Non-Borough cases.

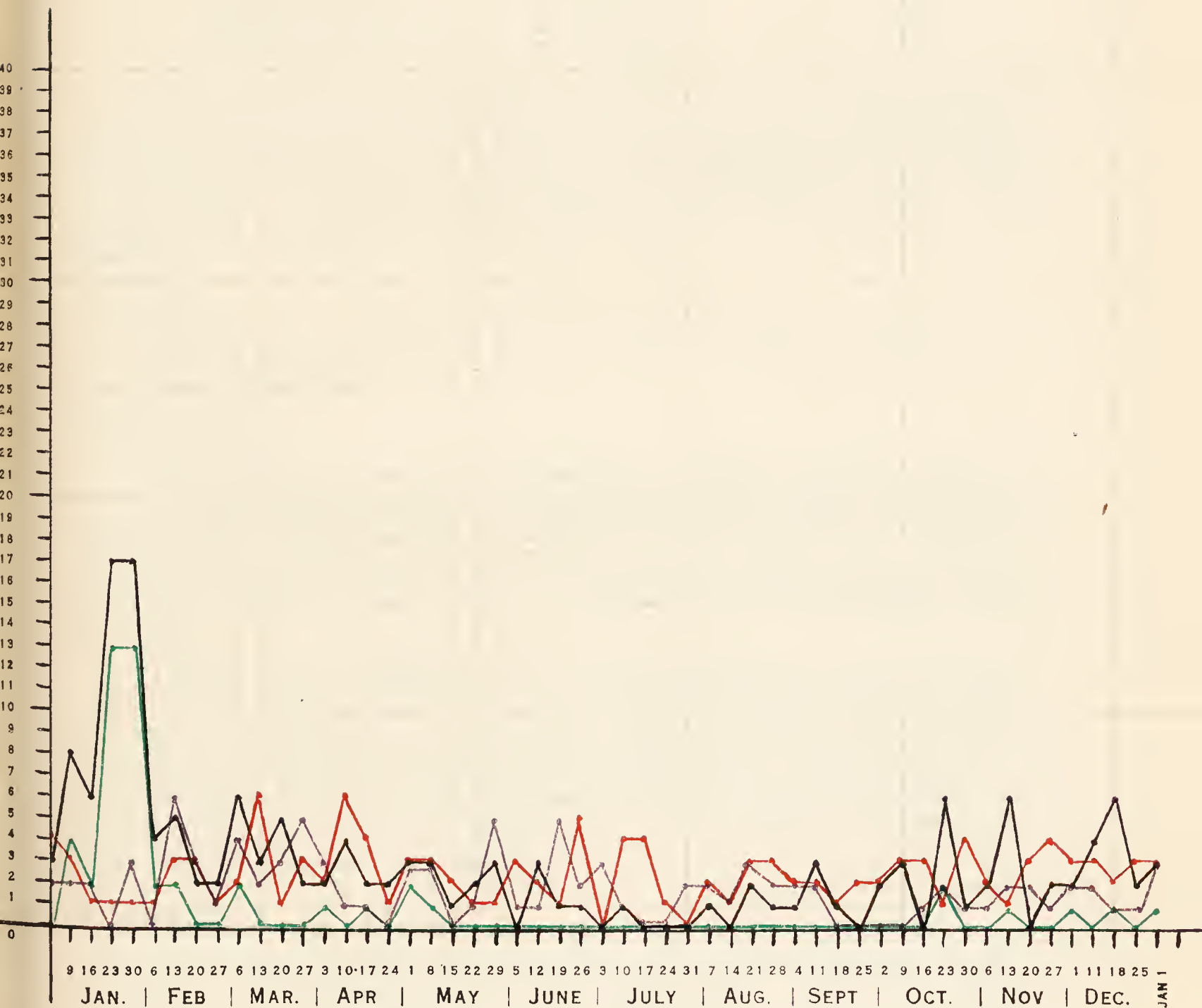
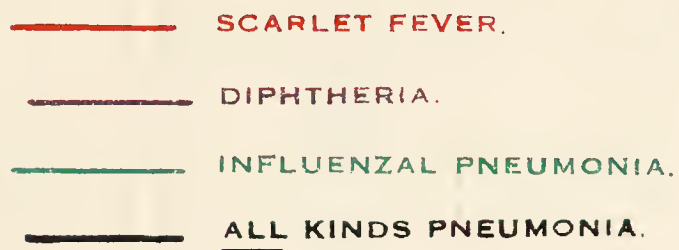
Three cases are shown as being admitted from outside districts. A case of Scarlet Fever was received from a home just outside the Borough boundary at the request of the parents, who are Huddersfield ratepayers; a child suffering from Measles was removed from the Children's Homes, Scholes, which at that time were under the administration of the Huddersfield Maternity and Child Welfare Committee; the third case was one of Cerebro-spinal Meningitis, ordinarily resident in the Borough of Brighouse, for the hospital charges of which the Brighouse Corporation accepted responsibility.

The cases marked Non-Borough cases, which numbered 6 last year, were all received from the Huddersfield Royal Infirmary. They included 2 cases of Scarlet Fever, 2 of Diphtheria, and 2 of Erysipelas. No payment was received for the treatment of these cases.

Table XXI. gives the notifications of infectious diseases received in the Borough during the past ten years. It will be observed from this that there has been a steady and substantial fall in the incidence of both Scarlet Fever and of Diphtheria since the year 1933, when epidemics of both diseases were encountered simultaneously. It will be noted also that the number of cases of Diphtheria notified fell below 100 for the first time during these ten years.

Table XXII. shows the monthly distribution of the notifications received during the year. The large number of notifications received in January was due to the high incidence of Pneumonia in that month, caused by a widespread epidemic of Influenza. The smallest number of notifications was received in the month of July. The

NOTIFICATIONS 1937.



most striking feature of the Table is not, however, the extremes, but the comparatively even distribution throughout the year of cases of Diphtheria, of Scarlet Fever, and of Erysipelas. This even distribution appears also in the weekly notifications and is shown diagrammatically on page 94. In comparison note the jump in the notifications of Pneumonia received in the third and fourth weeks of January.

Case-Rate.

The following figures show the incidence of the notifiable infectious diseases which occurred locally as compared with England and Wales as a whole :—

Disease.	Case-rate in England and Wales.	Case-rate in Huddersfield.
Small-pox ...	0.00	0.00
Scarlet Fever ...	2.33	1.01
Diphtheria ...	1.49	0.77
Enteric Fever ...	0.05	0.02
Erysipelas ...	0.37	0.52
Pneumonia ...	1.36	1.26
Puerperal Fever ...	Not known	0.02
Puerperal Pyrexia ...	Not known	0.25

From the above it will be observed that the case rates of Scarlet Fever, of Diphtheria, and of Enteric Fever were each approximately one-half the averages for the whole country, whilst again the incidence of Erysipelas was above the average. The high case rate of this disease over a number of years was referred to in the previous year's Report.

Small-pox.

For the seventh year in succession the Borough has been quite free from Small-pox.

Scarlet Fever.

The number of cases of Scarlet Fever notified, namely 122, was 97 less than in the previous year, 326 less than in 1935, and 614 less than in 1934. With the fall in incidence, the severity of the infection appeared also to become less and few cases with toxic symptoms were encountered. There were no deaths from this disease during the year.

In spite of the mildness of the prevailing type of Scarlet Fever, it is believed that hospital treatment is advisable in the large majority of cases. The disease is a generalised infection which may give rise to serious complications even in the mildest case, and these can be guarded against only by close observation and careful nursing. Of the 122 cases notified locally last year, 118, or 96.7 per cent., were treated at the Isolation Hospital.

Diphtheria.

Reference has already been made to the exceptionally low incidence of Diphtheria during the past year. Of the 94 cases notified, 92, or 97.9 per cent., were treated in hospital—91 at the Borough Isolation Hospital and 1 at the Royal Infirmary. In the case dealt with at the Infirmary the patient was too ill to be moved when notified and died on the day following notification.

During the year there were only 4 deaths of Borough patients from Diphtheria, giving a mortality-rate of 4.25, compared with 11.6 in 1936. Two further deaths from Diphtheria occurred, but in these cases the patients resided ordinarily outside of the Borough and the deaths were allocated to the districts concerned. One was the case referred to above where death occurred at the Royal Infirmary. In the other case the patient had been admitted to the Royal Infirmary for treatment and was transferred from there to Mill Hill Isolation Hospital.

There were again no deaths during the year amongst children who had been immunised.

Enteric Fever.

Only 2 notifications of this disease were received during the year, though actually 3 cases were brought to notice. In the first case the patient was admitted to the Royal Infirmary with the condition undiagnosed, and died on the day following admission. After death bacteriological examination revealed that the cause of death was infection by *B. Typhosis*. The second case occurred in the same house five weeks later, and although the connection between the two could not be ascertained, the source of infection was undoubtedly the same, for *B. Typhosis* was isolated from this case also. The third patient was admitted to hospital two months later, but in this case there was no connection with the previous two cases, for the infection was found to be due to the Paratyphoid *B.* organism.

Puerperal Fever and Pyrexia.

(a) Puerperal Fever.

Under the provisions of the Public Health Act, 1936, cases of Puerperal Fever ceased to be notifiable on and after October 1st, 1937. In accordance with this Act all such cases are now notifiable as Puerperal Pyrexia. The change is one which is welcomed by all, for the retention of both terms for a condition which in many cases could be notified under either or both, gave rise to much confusion. Moreover, cases of Puerperal Pyrexia were often notified subsequently as cases of Puerperal Sepsis and so the total figures gave no indication of the actual number of cases dealt with.

Up to September 30th, when the new regulations came into operation, 2 cases of Puerperal Fever had been notified. One of these patients was treated at St. Luke's Hospital and recovered. The other was treated at home and unfortunately died, giving the only death from this condition which occurred during the year.

(b) Puerperal Pyrexia.

Thirty notifications were received, being 7 more than in the previous year. Of these, 16 were Borough cases and 14 Non-Borough cases. Of the 30 cases, 27 were treated in hospital, and 2, both of whom were Non-Borough patients, died.

Pneumonia.

As mentioned earlier in the Report, a sharp rise in the incidence of Pneumonia occurred in the third and fourth weeks of January due to the prevalence of Influenza. The total number of notifications for the year, 153, exceeded that of the previous year by 19, but deaths from this cause, which numbered 82, were 23 fewer than in 1936. Of the 82 patients who died from the disease, only 26, or 32 per cent., had been officially notified as suffering from the disease.

Erysipelas.

Notifications of this disease last year numbered 63, compared with 81 in the previous year, but even with this lowered incidence the case rate was higher than the average rate for the whole country. Amongst the 63 cases are included 4 Non-Borough cases which were notified in accordance with the new regulations.

Of the cases notified, 18 were treated in hospital, and altogether there were 2 deaths, compared with 12 in the previous year.

Cerebro-spinal Meningitis.

Sporadic cases of this most dangerous disease continue to appear. In such cases the source of infection invariably remains a mystery, and still more mysterious is the absence of spread of infection when cases do occur. Last year 2 cases, both of which occurred in the month of January, were notified. The first, a boy of seven years of age, was notified from the Royal Infirmary and died there on the same day. The second case, a boy of six years, was also notified from the Royal Infirmary. He was transferred to Mill Hill Isolation Hospital, where he made a rapid and complete recovery.

Acute Polio-myelitis.

There was 1 notification of this disease during the past year, the patient being a child sixteen months old. It is fortunate that there was no spread of infection to other children, for although the death-rate from it is not so high as in the case of Cerebro-spinal Meningitis, the disease often leads to paralysis and a severe degree of crippling.

Encephalitis Lethargica.

There were no notifications and no deaths from this disease.

Diarrhœa.

No notifications of this disease were received during the year. Table XIX. shows that 2 deaths are included under this heading, but in neither case was the condition one of infective Enteritis. In one, Gastro-enteritis was associated with Marasmus and Hypospadias, whilst in the second, Enteritis was merely a terminal condition resulting from Prematurity.

Ophthalmia Neonatorum.

Table XXIII shows in tabular form, as requested by the Ministry of Health, details concerning the cases of this disease brought to notice. In years past this disease was responsible for a large amount of blindness, but the Table shows that in all the 18 cases notified last year, vision fortunately remained unimpaired.

Immunisation.

Immunisation against Diphtheria is still offered free of charge to all children whose parents will accept it, and attention is specially directed to the protection afforded, by a special letter sent to all parents as their children become three years of age. With the falling incidence of Diphtheria in the district, dread of the disease has gradually become less, and as a result, fewer parents signify their willingness to accept this security. Last year only 482 children were immunised, compared with 787 in the previous year, and 1,136 in 1935.

Non-notifiable Infectious Diseases.

The following Table records the monthly distribution of cases of the common (non-notifiable) infectious diseases reported amongst school children during the year 1937 :—

Month.	Measles.	German Measles.	Whooping Cough.	Mumps.	Chicken Pox.	Influenza.	Total.
January	9	—	31	37	4	1366	1447
February	2	1	4	12	7	2	28
March	20	—	25	12	118	—	175
April	41	1	29	9	68	1	149
May	137	—	7	12	60	—	216
June	119	—	5	2	48	—	174
July	41	—	2	—	50	—	93
August	1	1	—	—	6	—	8
September	36	—	—	1	38	—	75
October	68	—	1	6	52	—	127
November	6	—	1	1	71	4	83
December	21	—	—	2	80	—	103
TOTAL	501	3	105	94	602	1373	2678

The total number of cases of these diseases occurring amongst school children shows a substantial increase over that for 1936—2,678 as compared with 1,908. This increase is accounted for by the epidemic of influenza experienced during January, for with the exception of varicella (chicken-pox) all the other non-notifiable diseases showed a markedly lower incidence in 1937.

TABLE XXIV.
DEATHS FROM TUBERCULOSIS.

Occupations and Sex of Tuberculous Persons in Huddersfield.

Occupation.	1933.		1934.		1935.		1936.		1937.		Total.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Agricultural Workers	—	—	—	—	—	—	1	—	—	—	1	—
Metal Workers ...	4	—	—	—	3	—	—	—	2	—	9	—
Transport Workers	3	—	4	—	—	—	2	—	4	—	13	—
Commercial Occupations ...	9	—	7	—	9	2	4	1	8	2	37	5
Household Duties (includes Housewives, Domestic, etc.)	16	31	14	30	16	21	15	15	13	19	74	116
Retired or not gainfully Occupied												
Too Young for Occupation												
Textile Workers ...	8	1	8	6	7	10	7	7	7	3	37	27
Building Trades (includes Quarry-workers) ...	3	—	2	—	4	—	1	—	6	—	16	—
Clerks, Typists and Draughtsmen ...	3	2	2	1	—	—	1	—	—	—	6	3
Unspecified Trades ...	9	—	11	3	8	—	5	—	6	—	39	3
Chemical Workers ...	5	—	1	—	—	—	—	—	—	—	6	—
Engineering Trades...	4	—	2	—	—	—	4	—	2	—	12	—
Total ...	64	34	51	40	47	33	40	23	48	24	250	154

TABLE XXV.
CASES OF TUBERCULOSIS NOTIFIED.
52 weeks ended 1st January, 1938.

Age periods.	NEW CASES.				DEATHS.			
	Respiratory.		Non-Respiratory.		Respiratory.		Non-Respiratory.	
	M.	F.	M.	F.	M.	F.	M.	F.
Under 1 year	—	—	—	—	—	—	—	—
1 & under 5 yrs.	1	1	5	3	—	—	1	—
5 „ 10 „	2	4	5	1	—	—	—	—
10 „ 15 „	—	3	4	4	1	—	—	—
15 „ 20 „	6	3	2	5	2	1	2	1
20 „ 25 „	5	3	2	5	4	1	—	1
25 „ 35 „	7	10	2	4	11	10	1	1
35 „ 45 „	7	3	1	2	7	1	1	1
45 „ 55 „	5	2	—	2	8	2	—	1
55 „ 65 „	12	1	—	—	6	3	1	—
65 & upwards	2	1	—	—	3	1	—	—
Total at all ages.	47	31	21	26	42	19	6	5

TABLE XXVI.
DEATHS FROM TUBERCULOSIS.
Periods between Notification and Death.

Age Periods.	Died prior to notification	Under 1 month	1-3 months	3-6 months	6-12 months	Total under 1 year	1-2 years	2-4 years	4 years and over	Grand Total
Under 1 year ...	—	—	—	—	—	—	—	—	—	—
1 to 15 years ...	—	1	—	1	—	2	—	—	—	2
15 to 25 years ...	—	2	3	1	3	9	—	2	1	12
25 to 45 years ...	3	2	5	2	2	14	4	8	7	33
45 to 65 years ...	4	4	2	3	1	14	1	3	3	21
Over 65 years ...	1	—	1	—	—	2	—	1	1	4
Total ...	8	9	11	7	6	41	5	14	12	72

TABLE XXVII.
NEW CASES OF TUBERCULOSIS
(Other than formal notifications.)
52 weeks ended January 1st, 1938.

Age Periods.	Respiratory.		Non-Respiratory.	
	M.	F.	M.	F.
Under 1 year ...	—	—	—	—
1 and under 5 yrs.	—	—	—	—
5 „ 10 „	1	—	2	1
10 „ 15 „	—	2	2	2
15 „ 20 „	—	—	1	—
20 „ 25 „	1	5	2	—
25 „ 35 „	3	4	1	1
35 „ 45 „	3	4	1	2
45 „ 55 „	4	3	—	1
55 „ 65 „	—	1	1	—
65 and upwards ...	—	1	—	—
Total at all ages ...	12	20	10	7

Source of Information.

	No. of Cases	
	Respiratory.	Non-Respiratory.
Death Returns—		
From local Registrars	2	4
Transferable deaths from Registrar-General	2	—
Posthumous notifications	—	—
“ Transfers ” from other areas (other than transferable deaths)	28	13
Other sources if any (specify)	—	—

TUBERCULOSIS SCHEME OF THE HUDDERSFIELD COUNTY BOROUGH COUNCIL.

TABLE XXVIII.

RETURN FOR THE YEAR 1937.

(A) Return showing the work of the Dispensary.

DIAGNOSIS.	PULMONARY.				NON-PULMONARY.				TOTAL.				GRAND TOTAL.	
	Adults.		Children.		Adults.		Children.		Adults.		Children.			
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.		
A.—NEW CASES examined during the year (excluding contacts) :—														
(a) Definitely tuberculous ...	41	20	2	6	4	13	11	7	45	33	13	13	104	
(b) Diagnosis not completed ...	—	—	—	—	—	—	—	—	4	5	—	2	11	
(c) Non-tuberculous ...	—	—	—	—	—	—	—	—	37	49	18	11	115	
B.—CONTACTS examined during the year :—														
(a) Definitely tuberculous ...	—	—	1	1	—	—	—	1	—	—	1	2	3	
(b) Diagnosis not completed ...	—	—	—	—	—	—	—	—	—	—	1	1	2	
(c) Non-tuberculous ...	—	—	—	—	—	—	—	—	29	36	29	30	124	
C.—CASES written off the Dispensary Register as														
(a) Recovered ...	9	19	15	10	9	2	8	6	18	21	23	16	78	
(b) Non-tuberculous (including any such cases previously diagnosed and entered on the Dispensary Register as tuberculous) ...	—	—	—	—	—	—	—	—	68	89	48	42	247	
D.—NUMBER OF CASES on Dispensary Register on December 31st :—														
(a) Definitely tuberculous... ..	206	186	48	50	41	52	53	45	247	238	101	95	681	
(b) Diagnosis not completed ...	—	—	—	—	—	—	—	—	4	5	1	3	13	

1. Number of cases on Dispensary Register on January 1st, 1937 ...	717	2. Number of cases transferred from other areas and cases returned after discharge under Head 3 in previous years ...	...	...	...	42
3. Number of cases transferred to other areas, cases not desiring further assistance under the scheme, and cases "lost sight of" ...	39	4. Cases written off during the year as Dead (all causes) ...	...	...	...	60
5. Number of attendances at the Dispensary (including contacts) This figure includes 693 attendances at the Ultra Violet Ray Clinic.	4398	6. Number of Insured Persons under Domiciliary Treatment on the 31st December, 1937 ...	...	...	...	18
7. Number of consultations with medical practitioners :— (a) Personal ... (b) Other ...	68 501	8. Number of visits by Tuberculosis Officers to homes (including personal consultations) ...	...	...	...	181
9. Number of visits by Nurses or Health Visitors to homes for Dispensary purposes ...	1543	10. Number of :— (a) Specimens of sputum, etc., examined ... (b) X-ray examinations made in connection with Dispensary work	...	...	...	705 734
11. Number of "Recovered" cases restored to Dispensary Register, and included in A(a) and A(b) above ...	5	12. Number of "T.B. plus" cases on Dispensary Register on December 31st, 1937 ...	...	...	...	157

(B) Number of Dispensaries for the treatment of Tuberculosis (excluding centres used only for special forms of treatment).

Provided by the Council	...	...	...	...	1
Provided by Voluntary Bodies	...	...	...	...	Nil.

TABLE XXIX.

(C) Number of beds available for the treatment of Tuberculosis on the 31st December in Institutions belonging to the Council.

NAME OF INSTITUTION.	FOR PULMONARY CASES.		FOR NON-PULMONARY CASES.		TOTAL.
	Adults.	Children under 15.	Adults.	Children under 15.	
Bradley Wood Sanatorium ...	34	20	11	10	75
Mill Hill Isolation Hospital ...	34	—	—	—	34
Royal Infirmary ...	Beds available as required.				

(D) Return showing the extent of Residential Treatment and Observation during the year in Institutions (other than Poor Law Institutions) approved for the treatment of Tuberculosis.

	In Institutions on Jan. 1st.	Admitted during the year.	Discharged during the year.	Died in the Institutions.	In Institutions on Dec. 31st.
Number of doubtfully tuberculous cases admitted for observation.	Adult males	—	6	5	—
	Adult females	—	7	6	—
	Children ...	—	14	13	—
	Total ...	—	27	24	—
Number of patients suffering from pulmonary tuberculosis.	Adult males	23	72	40	29
	Adult females	22	31	27	8
	Children ...	13	10	12	1
	Total ...	58	113	79	38
Number of patients suffering from non-pulmonary tuberculosis.	Adult males	2	6	8	—
	Adult females	4	11	8	1
	Children	12	17	13	—
	Total	18	34	29	1
GRAND TOTAL	76	174	132	39	79

(F) Return showing the results of observation of doubtfully tuberculous cases discharged during the year from Institutions approved for the treatment of Tuberculosis.

Diagnosis on discharge from observation.	FOR PULMONARY TUBERCULOSIS.						FOR NON-PULMONARY TUBERCULOSIS.						TOTALS.					
	Stay under 4 weeks.			Stay over 4 weeks.			Stay under 4 weeks.			Stay over 4 weeks.								
	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.
Tuberculous ...	1	1	—	1	2	4	1	—	2	—	—	1	3	3	7			
Non-tuberculous	1	2	1	1	1	2	—	—	—	—	—	3	2	3	6			
Doubtful ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—			
TOTALS ...	2	3	1	2	3	6	1	—	2	—	—	4	5	6	13			



TABLE XXX.

(G) Return showing the immediate results of treatment of definitely tuberculous patients discharged during the year from Institutions approved for the treatment of Tuberculosis.

Classification on Admission to the Institution		Condition at time of discharge.	Duration of Residential Treatment in the Institution.																Grand Totals.		
			Under 3 months but exceeding 28 days				3-6 months.				6-12 months				More than 12 months.					Totals.	
			M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.		F.	Ch.
PULMONARY TUBERCULOSIS.	Class T.B. minus.	Quiescent ...	1	—	—	1	4	—	1	3	6	2	3	4	5	10	10	25			
		Not quiescent ...	2	1	—	1	3	—	3	—	1	—	—	6	4	1	11				
		Died in Institution	2	—	—	—	—	—	—	1	—	—	—	2	1	—	3				
	Class T.B. plus. Group 1.	Quiescent ...	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1				
		Not quiescent ...	—	—	—	1	—	—	—	—	—	1	—	2	—	—	2				
		Died in Institution	—	—	—	—	—	—	—	1	—	—	—	1	—	—	1				
	Class T.B. plus. Group 2.	Quiescent ...	1	—	—	—	—	—	—	3	3	—	1	2	5	5	10				
		Not quiescent ...	2	1	—	3	1	—	2	4	—	2	2	9	8	—	17				
		Died in Institution	6	2	—	3	1	—	2	—	—	3	1	14	4	—	18				
	Class T.B. plus. Group 3.	Quiescent ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—			
	Not quiescent ...	3	—	—	—	—	—	—	—	—	—	—	3	—	—	3					
	Died in Institution	—	—	—	—	—	—	—	1	—	—	1	—	2	—	2	—				
	TOTALS (pulmonary)	17	4	—	9	9	—	13	11	7	10	8	5	49	32	12	93				
NON-PULMONARY TUBERCULOSIS.	Bones and Joints.	Quiescent ...	—	—	—	—	—	—	1	—	—	1	—	3	2	—	3	5			
		Not quiescent ...	2	—	—	—	—	—	—	2	—	—	—	2	2	—	4				
		Died in Institution	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—				
	Abdominal.	Quiescent ...	—	—	—	1	—	1	—	1	3	—	—	1	1	5	7				
		Not quiescent ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—				
		Died in Institution	—	1	—	—	—	—	—	—	—	—	—	—	1	—	1				
	Other Organs.	Quiescent ...	—	—	—	1	—	—	—	—	—	—	—	1	—	—	1				
		Not quiescent ...	—	2	—	—	—	—	—	—	—	—	—	—	2	—	2				
		Died in Institution	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—				
	Peripheral Glands.	Quiescent ...	—	—	—	—	—	1	—	—	2	—	—	—	—	3	3				
	Not quiescent ...	—	—	—	—	—	—	1	—	—	—	—	—	—	1	1					
	Died in Institution	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—					
	TOTALS (non-pulmonary)	2	3	—	2	—	3	1	3	5	1	—	4	6	6	12	24				

Cases of Tuberculosis notified during the 52 weeks ended January 1st, 1938.

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TABLE XXXIII.

No. of Cases of Tuberculosis Treated in Hospital.

	ADULTS.										CHILDREN.										GRAND TOTAL.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																				
	Pulmonary.					Non-Pulmonary.					Observation.					TOTAL.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																									
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																							
No. in Hospital on January 2nd, 1937	17	17	2	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	

TUBERCULOSIS.

Ernest Firth, M.B., Ch.B., Assistant Tuberculosis Officer.

Notification.

Owing to the inclusion in the Borough of new areas accurate population figures are not available and so rates of incidence and deaths, &c., per 1,000 of the population cannot be given.

The total notifications were 125 and of these 78 were Pulmonary and 47 Non-Pulmonary; compared with the previous year these figures show a decline of 28 Pulmonary and an increase of 1 Non-Pulmonary notification. The type of case when first seen shows very little improvement on previous years and the diagnosis of an early case of Pulmonary Tuberculosis remains an infrequent event.

Deaths.

The number of deaths from all forms of Tuberculosis was 72, an increase of 9 on the figures of last year. This increase is relatively large, but taking into consideration the added areas and a fairly severe epidemic of Influenza in the early months of the year, the increase should not be regarded as a very serious rise in the mortality rate.

Deaths prior to notification showed a welcome fall to 8, a decline of 4 from 1936. It is hoped that this fall is progressive and that in time such a death will be recorded as a very unusual event. To bring about such a sequence of events we require the complete co-operation of the general public, the family doctor and the Tuberculosis Officer; the two latter are already in very close contact and it only requires more confidence on the part of the public to secure the best results.

Unfortunately there are still amongst us some who prefer quack remedies to orthodox treatment, and when these fail, as fail they must, the blame is placed not on the remedy, but on the family practitioner for not making an earlier diagnosis. Until such misplaced credence can be guided into wiser channels unnecessary deaths will continue to occur.

Public Health (Prevention of Tuberculosis) Regulations, 1925.

No occasion arose during the year where it was deemed necessary to enforce these regulations.

Tuberculosis Clinic.

The number of sessions and hours of same were unchanged during the year.

The attendances were 3,705, a decrease of 96 on the previous year's figures. The main use of the clinic continues to be for diagnosis; to keep in close contact with known cases, so as to make sure they are leading the correct mode of life; if possible to detect early signs of renewed activity of the disease, and in such cases to give immediate treatment.

Several patients who were discharged from the Sanatorium not having completed a course of Gold treatment had it completed at the clinic.

One patient who had active bilateral lung disease developed massive infection of the cervical lymph glands and she was given a course of Tuberculin. This treatment undoubtedly improved the glandular condition, but the Pulmonary disease continued to progress in extent.

New Patients.

In all, 230 patients were examined and of these 104 were considered to be Tuberculous. Of the remainder, 115 were not suffering from Tuberculosis and in 11 the diagnosis was not completed at the year end. The usual routine examination in each case was carried out and many of the children had a Mantoux Tuberculin Test. Although a positive result indicates only the presence of infection, a negative result is of very great value as indicating the absence of any Tubercular infection.

Contacts.

The immediate family contacts to the new cases notified during the year were 163, and of these 86 consented to examination, a percentage of 52.8 as compared with 53.1 per cent. last year. This figure shows little change, and at times one longs for a form of dictatorship under which all contacts would be compelled in their own and in their neighbours' interests to submit to examination.

With careful contact examination early cases amenable to treatment can be found, and in the case of disease in children the infecting agent can be discovered and treated.

Of the 86 cases examined, 58 agreed to have an X-ray examination.

Laboratory Examinations.

These numbered 705 during the year and consisted mainly of specimens of sputum, with small numbers of specimens of pleural fluid, pus, urine, &c.

Domiciliary Visits.

The number of home visits paid by the Assistant Tuberculosis Officer was 181, and at 68 of these the patient's private practitioner was present. As in the past, every effort is made to keep the private practitioner fully informed of his patient's condition; in addition to forwarding a report when the patient is first seen, a full report of the patient's condition and treatment is sent on his or her discharge from the Sanatorium.

Visits by the Tuberculosis Nurse numbered 1,543, an increase of 75 over last year. In addition to these she had 693 attendances at her Ultra Violet Light Clinic. The extension of the Borough boundaries has added greatly to her work, especially in one area where housing conditions are poor. Her main duties consist in advising how best to re-arrange the household to prevent spread of infection, to report any gross defects in the house and persuade both patients and contacts to attend the clinic for examination and treatment. Each case is visited several times per year and her knowledge of the home conditions plays an important part in the Tuberculosis work of the area.

Clinic Register.

On December 31st the number of cases on the register was 681, a decrease of 31 as compared with last year. Of the total number, 490 were Pulmonary cases and of these 157, or 32 per cent., had a positive sputum. This represents a small increase on the previous year.

During the year 5 cases were restored to the register who had been removed at an earlier date when it was thought that the disease had been completely arrested. The number is fairly small, but does make one realise that the word "cure" in Tuberculosis must be very sparingly used.

Bradley Wood Sanatorium.

In the latter part of the year building commenced on the Recreation Hall and the Resident Medical Officer's house, whilst the plans of the new female pavilion were in an advanced state.

During 1937, 125 patients were admitted to the Sanatorium, an increase of 9 compared with the previous year. The policy of using Mill Hill Hospital for the advanced cases was continued and only those in whom there was a reasonable prospect of arresting the disease were admitted to the Sanatorium. Deaths in the institution numbered 15, a slight increase over the previous year. Of the total deaths, 54 per cent. died in one or other of our institutions. The increase in this percentage suggests that the public are realising more and more that they cannot adequately care for their relatives at home during the terminal stages of the disease.

X-ray Examinations.

During the year, 734 patients were examined and screenings were done.

A further improvement was made in the plant by converting it to a shock proof apparatus and adding a special change over switch from the screening stand to the Potter Buckey Couch. These additions bring the plant into line with modern equipment and make the production of satisfactory films a relatively simple matter.

Artificial Pneumothorax.

Cases suitable for this method of treatment were more numerous than in previous years, and in all 13 inductions were attempted. Of these, 9 were successful and 4 failed.

During the year treatment was given to 24 patients and the total refills numbered 397. Treatment was discontinued in 4 cases; of these 2 died, in one the lung re-expanded, and the remaining patient had her pneumothorax converted to an oleo-thorax. The condition of the remaining 20 patients was definitely improved by this treatment and their refills will be continued in 1938.

Phrenic Evulsion.

Once again the number of cases requiring this method of treatment was small—only 4 patients were operated upon.

Three patients had a complete evulsion and responded well to treatment, but the fourth had only a temporary paralysis as it was doubtful if improvement would take place. This cautious approach was justified for no improvement took place, and after a lapse of three months the diaphragm took up its normal function and the patient was no worse off than before the operation.

Thoracoplasty and Thoracoscopy.

A notable advance during the year has been the acceptance by the Health Committee of a scheme whereby patients who require special surgical treatment can be sent to either the St. James' Hospital, Leeds, or the Brompton Hospital, London, and the cost of their maintenance borne by the Committee.

Two patients were sent to the Brompton Hospital to have a Thoracoplasty and the results to date have been very satisfactory. In both cases the operation was on the left side and portions of

seven ribs were removed. The operation is a serious one and not to be lightly undertaken, but in carefully selected cases and performed by an expert Thoracic Surgeon the risks are not so great and in such cases the results are encouraging.

Two cases were admitted to St. James' Hospital, Leeds, for Thoracoscopy. Both patients had undergone artificial pneumothorax treatment previously, but the presence of adhesions was preventing a satisfactory collapse of the lung. Unfortunately in both cases the adhesions were found too large to make division a safe procedure; this means that Thoracoplasty will have to be considered.

Gold Therapy.

In previous reports doubts were expressed regarding the value of this form of treatment and only 14 patients had a course of injections during the year.

The following is an assessment of their condition at the year end :—

Improved ...	...	...	...	...	7
No change ...	...	...	...	...	5
Worse ...	...	...	...	...	2

In the 2 patients whose condition deteriorated it is believed that nothing would have arrested the course of the disease and that the Gold treatment, although it did not bring about an improvement, had no harmful effects.

No patient had to have the treatment discontinued because of toxic symptoms.

Orthopædic Cases.

Once again conservative treatment has been the method of choice and the results have proved its soundness.

One patient had his knee joint excised but died a few weeks later due to an acute exacerbation of his Pulmonary lesion.

The following plaster splints have been made :—

Ankle Joint ...	...	...	...	3
Double Spica ...	...	...	...	2
Long Single Spica ...	...	...	...	7
Plaster Bed ...	...	...	...	1
Plaster Lid ...	...	...	...	2

In addition, several Thomas' frames, Posterior Spinal Supports and Walking Calipers were obtained.

On several occasions Mr. W. Barclay, F.R.C.S., the Consulting Orthopædic Surgeon, gave valuable advice and help.

Ultra Violet Light.

Treatment has been on much the same lines as last year and has proved to be a very valuable aid.

Cases dealt with were as follows :—

ADULTS—MALE.				Improved	No change	Died
T.B. Abdomen ...	...	...	...	1	—	—
T.B. Hand ...	...	...	...	1	—	—
T.B. Testis ...	...	...	...	1	—	—
ADULTS—FEMALE.						
T.B. Abdomen ...	...	...	...	3	—	—
General tonic treatment	...	...	...	1	—	—

During the year there were 271 sessions. Of these, 115 were for adults and 156 for children. The total attendances were 1,240.

Particulars regarding Ultra Violet Light treatment for children will be found in the School Medical Report for the year.

Mill Hill Hospital.

In the two Tuberculosis Wards of this Hospital there are 34 beds available.

During the year 37 patients were admitted ; of these, 24 died in the institution and 12 were discharged as either quiescent or unwilling to remain in Hospital for a further period in spite of the risk brought about by their discharge both to themselves and to their immediate contacts.

VACCINATION.

Ernest Firth, Vaccination Officer.

The Vaccination Acts, 1867 to 1898, and the Vaccination Act, 1907.

TABLE XXXIV.

Registration Sub-Districts.	No. of Births registered from 1st January to 31st December 1936.	No. successfully Vaccinated by Public Vaccinators.	No. successfully Vaccinated by Private Practitioners	No. In-susceptible of Vaccination.	No. who have had Small pox.	No. of Statutory Declarations of Conscientious Objections.
1. Huddersfield ...	1293	189	108	1	—	876
2. Almondbury ...	198	30	16	1	—	139
3. Lockwood ...	277	61	13	—	—	185
Total ...	1768	280	137	2	—	1200

Registration Sub-Districts.	No. who have died Un-vaccinated.	No. Postponed by Medical Certificate.	No. removed to other Districts and Vaccination Officer notified.	No. of Cases not Found.	No. of Defaulters.	
1. Huddersfield ...	65	13	3	34	4	
2. Almondbury ...	8	1	—	3	—	
3. Lockwood ...	11	1	—	6	—	
Total ...	84	15	3	43	4	

From the above return it will be found that for the year 1936 the percentage of children vaccinated was 23.7, being exactly the same percentage as that for the previous year. The percentage of children in respect of whom exemption certificates were obtained by the parent making a statutory declaration before a Justice of the Peace or a Commissioner for Oaths was 67.9, compared with a percentage of 68.5 in 1936, though the actual number who claimed exemption was slightly greater.

VENEREAL DISEASES.

Denton Guest, M.D., Ch.B., Assistant Medical Officer of Health for Venereal Diseases Work.

During the year under review the total attendances were nearly 1,900 fewer in number than in the previous year. This drop is accounted for chiefly by the reception of fewer new cases of Gonorrhœa from the West Riding areas. Only 40 such cases were dealt with during 1937, compared with 89 in 1936. Such a drop is hard to explain, but it may be due to working conditions, with difficulty in attending at the hours during which the clinic is open. On the other hand the total of new cases of Gonorrhœa dealt with at the clinic, namely 115, is exactly the same as the number recorded in 1936.

The most striking feature of the year under review is brought to notice when the figures for new cases of Syphilis are analysed. County Borough new cases number 61, and those from the West Riding 21. These figures compare with 42 and 12 respectively for the year 1936.

Of these 82 new cases of Syphilis, 40 were of recent dated infection and 11 were congenital cases, the remaining 31 being cases first seen in the later stages of the disease.

No cases of Soft Sore were seen during the year, but 159 cases of Non-Venereal infection sought advice.

Those who defaulted from treatment during the year numbered 58. Of these, 8 cases (2 males with Primary Sores and 6 women suffering from Secondary Syphilis) did not receive one full course of treatment. The remainder of the cases suffering from Syphilis received at least one full course of treatment.

Twenty-nine cases of Gonorrhœa of recent dated infection ceased treatment before tests for cure had been instituted, and 1 case of Chronic Gonorrhœa also failed to complete treatment.

In addition to these cases, 2 Syphilitics and 18 cases of Gonorrhœa failed to complete full tests of cure, although they had completed their treatment.

The pathological work of the department increased by 24 specimens to a total of 1,087, and of these, 19 were examinations by Dark Ground Illumination for the presence of Spirochaetes.

Some innovations in treatment have been carried out, and it is evident that the use of Sulphanilamide in the treatment of Gonorrhœa must occupy a place in our armamentarium.

An investigation has been started in parallel with the Wassermann Test into the value of the Laughlen Test for the microscopic rapid diagnosis of Syphilis, but it is yet too early to form any definite conclusions.

One point does seem to emerge so far—that it is not very reliable after treatment has been instituted, though for new cases it seems to give fairly reliable results.

Pathological Examinations.

The pathological work carried out at the Venereal Diseases Clinic showed a slight increase during the year. In the current year 1,087 specimens were examined, as against 1,063 in 1936.

In addition to the above work, which is carried out by the Venereal Diseases Medical Officer personally, Wassermann tests to detect the presence of a Syphilitic infection are carried out at the Public Health Laboratory, Manchester. The following is a list of the examinations carried out during the year and shows the source from which the specimens examined were obtained. The figures given do not include 24 specimens which when sent were not examined or were found on examination to be unsatisfactory.

TABLE XXXV.

SPECIMEN	CLINIC				INFIRMARY				PRIVATE DOCTORS AND MEDICAL OFFICER OF HEALTH				TOTAL
	Result				Result				Result				
	Neg.	Pos.	Doubtful	Total	Neg.	Pos.	Doubtful	Total	Neg.	Pos.	Doubtful	Total	
Wassermann (Blood) ...	317	153	43	513	394	56	4	454	135	29	2	166	1133
Wassermann (Cerebro-spinal fluid)	118	4	—	122	2	—	—	2	2	—	—	2	126
Gonococci	19	4	3	26	12	2	1	15	2	1	—	3	44
Kahn Reaction	1	—	—	1	2	1	—	3	—	—	—	—	4
Totals	455	161	46	662	410	59	5	474	139	30	2	171	1307

In-Patient Treatment.

Patients requiring in-patient treatment on account of venereal diseases are admitted to the Huddersfield Royal Infirmary under the care of the Venereal Diseases Officer. The maintenance charges in such cases (8/- per patient day) are paid by the Local Authority.

During the past year, 17 persons received in-patient treatment in accordance with this arrangement, the average duration of residence in Hospital being 19.6 days.

The Local Authority accepted responsibility for the payment of the maintenance charges for 2 patients treated in the Hope Hospital at Leeds.

The following statement shows the services rendered at the Treatment Centre and in Hospital during the year, classified according to the areas in which the patients resided :—

THE VETERINARY OFFICER'S ANNUAL REPORT.

RAMSDEN STREET,
HUDDERSFIELD.

TO THE CHAIRMEN AND MEMBERS OF THE
WATCH AND HEALTH COMMITTEES.

GENTLEMEN,

I have the honour to submit my report of the work of the Veterinary Department during the past year, 1937.

The passing of the Agricultural Act, 1937, by Parliament, has brought with it impending changes of a revolutionary character as regards the functions of the veterinary profession in relation to the control of animal diseases. Part 4 of this Act contains the proposals of the Minister of Agriculture and Fisheries for the formation of a Centralised Veterinary Service for England, Wales and Scotland.

The administration of the veterinary duties in connection with the Diseases of Animals Acts and Orders and the Milk and Dairies Acts and Orders by veterinary officers of Local Authorities will cease, and the direction of this work will be from the Central State Authority. The boundaries of Local Authority areas will be ignored and inspections carried out on a geographical basis. The appointment of veterinary officers by Local Authorities will no longer be required, and all services previously discharged by them will be the functions of the Ministry of Agriculture and Fisheries with the exception of Meat and Milk hygiene.

Consequently, this will be the last Annual Report that I shall have the privilege of presenting to you.

Such changes can only be described as revolutionary, and are directly opposed to this country's well tried way of Local Self Administration.

Probable reasons for this new departure in veterinary public health work have been the lack of uniformity or negligence displayed by some Local Authorities in the discharge of the obligations laid upon them and the feeling that this state of affairs was undesirable. The Report of the Re-organisation Commission for Milk in 1933, and in the following year the findings of the Economic Advisory Council Committee on Cattle Diseases both stressed the urgent necessity for more energetic and uniform administration of existing legislation concerned with the control of animal diseases, and the need for increased veterinary health services. They advised, however, that this could be done by way of expansion of the already existing local government services. Time alone can answer the question of the desirability of this new venture.

As far as the Borough of Huddersfield is concerned there will be a continuity of my services to this area, as a part-time officer employed by the Ministry of Agriculture.

Since my appointment in 1930 as your Veterinary Officer, my Annual Reports have indicated that quiet progress has been maintained. There have been no major outbreaks of contagious disease in the Borough area, and the advance continued towards creating a

clean and healthy milk supply. To this end constant propaganda of the necessity for the observance of strict attention to the details of milk production and handling has been the policy rather than that of resort to legal pressure.

From year to year considerable improvements have taken place in the housing of cattle. Dairy accommodation has been provided or extended, and to-day there is no reason why the milk supply should not be a clean one. The one factor that is difficult to control is the human factor. Producers must maintain a constant carefulness and must instruct their assistants in the same way. This axiom, of course, applies to most industries and not only to that of milk production. There is no doubt that the vexed subject of Pasteurisation of the milk supply will come to the fore in the near future. Whether this process of milk treatment eventually becomes a fact or not, it will still be as necessary as ever to ensure that the original product is clean and healthy. That is a factor that should not be lost sight of, and I would urge that nothing should be done to suggest to producers of milk that continued care in its production and handling will be no longer of great importance. Milk production has been slowly raised in this country from a slough of carelessness to reasonable standards of purity. It will still remain the care of each Local Authority to see that this progress is maintained.

Diseases of Animals Acts and Orders.

Certain contagious diseases of animals are scheduled by the Ministry of Agriculture and Fisheries as notifiable. A few of these are dealt with entirely by the veterinary staff of the Ministry after notifications of suspicion by the Local Authority concerned, in accordance with procedure laid down in the Diseases of Animals Acts and Orders.

Foot and Mouth Disease.

Although this disease was widespread in the south and eastern counties in the latter part of the year, there was fortunately no spread to this area.

Swine Fever.

Three suspected outbreaks were investigated but only one was confirmed.

Anthrax.

No suspected cases have been reported or dealt with during the year.

Sheep Scab.

This district has continued to be free from the disease.

Tuberculosis.

The Tuberculosis Order of 1925 defines the notifiable forms of the disease. The Order acts as a supplement to the Milk and Dairies Acts and Orders, enabling diseased animals to be seized and slaughtered.

Twenty-five cows were found to come within the provisions of the Order and were slaughtered.

Ten were suffering from udder tuberculosis ; nine were affected with a chronic cough and showed definite clinical symptoms of the disease ; six showed tuberculous emaciation.

Compensation paid for the animals slaughtered amounted to £166 17s. 9d., and £55 3s. 1d. was recovered as salvage on the carcasses.

Markets Inspections.

These are carried out on Market days with the object of detecting contagious disease amongst cattle, pigs, sheep, horses and poultry exhibited there.

The policy of rejecting from the markets unsound or suspicious animals in the past has freed them to-day from that type of animal and dealer.

Transport of animals to markets is now done chiefly by motor vehicles hired for this purpose. The construction of these wagons and their cleansing and disinfection is dealt with by the Transit of Animals Order.

Strict compliance with the disinfection regulations is absolutely essential to minimise the risk of spread of infection.

Last year attention was drawn to the undesirable practice of exposing "overstocked" cows in markets. That is to say, cows are frequently left un milked with a view to distending the udders and showing the animals' capabilities as milkers. This practice is quite unnecessary to convince a purchaser that the cow is a good milker ; indeed the reverse is the case, as it is difficult to assess the animals' capabilities with a very distended udder. In addition, the practice may easily involve suffering to the animal itself, and one cattle dealer was prosecuted and convicted for such an offence.

A new Order concerning the sale of poultry in markets and sale yards prohibits the exposure of ailing or unfit poultry. Birds must not be offered for sale if owing to illness, infirmity, injury, fatigue, or any other cause there might be caused unnecessary suffering. The owner or person in charge may be required to remove the affected poultry to a suitable place in the vicinity of the market for treatment, or at the option of the owner or his agent for destruction.

Milk and Dairies Acts and Orders.

It is by virtue of these Orders that a certain standard of cleanliness in the production and handling of milk is to be expected and the possible spread of disease by milk controlled.

Milk and Dairies (Consolidation) Act, 1935, Sec. 4.

This section outlines the procedure to be taken when bulk samples of milk are found to contain tubercle bacilli.

Ninety-seven samples of bulk milk were examined from producers in the Borough and four cases were dealt with, a percentage of 4.12. The offending cow was detected in three cases and in one case subsequent samples were negative.

Milk (Special Designations) Order, 1936.

This Order permits the granting of licences by the local authorities for graded milks.

“Tuberculin-tested milk” is from tuberculin-tested cows.

“Tuberculin-tested milk (certified)” is similar milk produced and bottled on the farm.

If pasteurised it is then described as “Tuberculin-tested milk (Pasteurised).”

“Accredited milk” is raw milk from cows which are subjected to a quarterly clinical examination by a veterinary surgeon. It is bottled on the farm or elsewhere. It must be produced on premises having efficient methods of handling milk and must comply with certain special bacteriological standards as regards cleanliness.

“Pasteurised milk” is milk which has been retained at a temperature of 145° F. to 150° F. for thirty minutes and must not exceed a certain bacterial count.

In the Borough there are 3 producers of “Tuberculin-tested milk (Certified)” and 24 “Accredited” producers.

Milk and Dairies Order, 1926.

This Order details the requirements for securing the cleanliness of dairies and the hygienic methods by which milk should be produced and stored.

Part IV. of the Order deals with health and inspection of cattle and specifies certain diseases of cows which render milk unfit for human consumption.

Regulations are also laid down regarding the provision of wholesome water supplies; the lighting and ventilation of cowsheds and dairies; the construction of cowshed floors and drainage.

Health and Inspection of Cattle.

There have been no outbreaks of contagious disease and a good standard of health has been maintained.

Routine inspections are carried out on all farms within the Borough five times in the year, and additional visits are made in those cases where conditions have been found to be unsatisfactory and as often as possible at milking times.

Abnormal conditions of the udder necessitated the laboratory examination of 25 samples during the past twelve months. Pending the results of the biological tests of these individual samples, isolation of the suspected animal is carried out as far as practicable and the milk discarded.

Five of these samples proved to be positive to the presence of tubercle bacilli and these cows were accordingly slaughtered under the Tuberculosis Order.

In addition, 20 other cows were found to come within the scope of this Order and were similarly dealt with.

Milk Examinations.

A number of milk samples are taken weekly under the direction of the Medical Officer of Health and are examined as to their bacterial content. A reasonable standard such as that laid down for “Accredited Milk” is taken and samples which are found to be below this standard of cleanliness are reported to me for investigation at the source of supply.

Forty-three samples have been reported as unsatisfactory. Of these, 6 failed to pass the Methylene Blue reduction test, and 7 both this test and the coliform test.

The Methylene Blue reduction test gives an indication of the general bacterial cleanliness of milk.

The coliform test indicates the presence or absence of coliform organisms. These organisms should not be present in milk and indicate some faulty technique in production and handling. It has been customary in the past to regard their presence as indicative of excretal pollution but in the light of recent research this is not necessarily always the case.

The usual test for the presence of these organisms does not indicate to which particular group they belong. The report of the Medical Research Council on "The Bacteriological Grading of Milk," published in 1935, indicates that there are at least four main groups.

In addition to the existence of *Bac. Coli* in fæces, they may be found on hay and straw, grains, meals or feeding cakes. Their presence in these feeding stuffs is not due to excretal contamination, and consequently the presence of coliform organisms in milk samples does not necessarily mean the presence of cow dung. Their presence in milk in a considerable proportion of cases is due to dust or utensil contamination.

The return of 30 cases showing the presence of *Bac. Coli* in samples alone has been puzzling in many cases, when no obvious slackening in the milking routine could be detected. I am inclined to the opinion that many of these cases are due to the presence of dust in the cowshed arising from feeding materials and not necessarily always due to fæcal contamination. Hence the significance of the presence of these organisms remains somewhat doubtful, and that they are not always harmful must be borne in mind.

Their finding certainly indicates a fault in milking procedure and for that reason these cases should be followed up. With all the equipments of the modern cowshed and dairy, success or failure depends in the end upon the human factor.

Dairies on Farms.

Part V. of the Milk and Dairies Order deals with "General provisions for securing the cleanliness of dairies, &c., and for protecting milk against infection."

During the year four new dairies have been erected and additional accommodation provided on one to accommodate better equipment.

Cowsheds.

Two new cowsheds have been constructed and four have undergone re-construction to comply with modern requirements.

New floors have been laid in six farms and necessary repairs to floors carried out on five farms.

Summary.

No. of Registered Farms	...	...	135
„ Registered Farmers	...	...	125
„ Producer Retailers	...	...	106
„ Producer Wholesalers	...	...	12
„ Producers for own use	...	...	7

The approximate number of cows is 1,800, housed in 290 sheds. The approximate amount of milk produced daily in the Borough is 3,000 gallons, or 21,000 gallons per week.

The total number of inspections on farms during the twelve months under review is 1,120.

The total number of clinical examinations of cows is 7,263.

In conclusion, I would once again extend to the farmers my thanks for maintaining the general standard of cleanliness on their farms and for their courtesy and help.

The interest and assistance of other officers of the Corporation have been much appreciated and I am indebted to the members of the Borough Police Force for their ready help in carrying out the work under the Diseases of Animals Act.

Inspector J. Beever has rendered another year of willing and able assistance.

I would take this opportunity, Mr. Chairmen and Gentlemen, of thanking you for your ready support and appreciation of the work I have carried out during the past eight years.

I am,

Your obedient servant,

W. R. McKINNA, M.R.C.V.S., D.V.S.M.,
Veterinary Officer.

Appendix A.

REPORT
ON
Bacteriological Examination
OF
Corporation
Swimming Bath Water.

TECHNIQUE EMPLOYED.

(a) Sampling.

Samples were obtained from each pool by placing a 500 c.c. sampling bottle on the floor of the bath at the outflow grating and leaving it there five minutes. The bottle was sealed under water and brought to the laboratory as rapidly as possible, the delay in each case was less than ten minutes. By this method it was possible to obtain a sample of the water in what is probably its most contaminated state, *i.e.*, just before it leaves the pool for repurification.

(b) Bacteriological Examination.

i. PRESUMPTIVE TEST FOR B. COLI.

The samples from each pool were tested for the presence of this organism in 1 c.c., 5 c.c. and 10 c.c. amounts by inoculation of tubes containing appropriate quantities of McConkey's Bilesaltlactose medium and observation for the presence of acid and gas.

ii. ABSOLUTE NUMBER OF BACTERIA PRESENT.

Immediately on arrival at the laboratory a 1/100 dilution of each sample was made, 1 c.c. of this was added to 20 c.c. of melted nutrient agar (pH 7.4) at 50° C., and pour plates were made.

iii. EFFICIENCY OF CHLORINATION AND PURIFICATION.

This was tested by making 1/100 dilutions of each sample at hourly intervals and preparing pour plates in the manner described for the estimation of the absolute number of bacteria.

All plates were incubated for twenty-four hours at 37° C. The Hydrogen-ion concentration of each sample was estimated.

I. Cambridge Road Baths—Large Pool.

Water purified by filtration, four-hourly circulation, and by chlorination, 0.20 to 0.50 parts per million.

i. B. COLI PRESUMPTIVE TEST.

10 c.c.	...	...	Absent all tubes.
5 c.c.	...	...	„ „
1 c.c.	...	...	„ „

ii. ABSOLUTE NUMBER OF BACTERIA.

(Immediate examination.)

Colonies present on plate	...	72
„ per 1/100 c.c.	...	72
„ per 1 c.c.	...	7,200

iii. EFFICIENCY OF CHLORINATION AND PURIFICATION.

After standing 1 hour	...	18 colonies or 1,800 per c.c.
„ „ 2 hours	...	8 „ 800 „
„ „ 3 „	...	6 „ 600 „
„ „ 4 „	...	No colonies—Sterile.
„ „ 5 „	...	„ „
„ „ 6 „	...	„ „

Hydrogen-ion concentration—pH 6.8.

II. Cambridge Road Baths—Small Pool.

Purification as large pool.

i. B. COLI PRESUMPTIVE TEST.

10 c.c.	...	...	Absent all tubes.
5 c.c.	...	...	„ „
1 c.c.	...	...	„ „

ii. ABSOLUTE NUMBER OF BACTERIA.
(Immediate examination.)

Colonies present on plate	...	17
„ per 1/100 c.c.	...	17
„ per 1 c.c.	...	1,700

iii. EFFICIENCY OF CHLORINATION AND PURIFICATION.

After standing 1 hour	...	9 colonies or 900 per c.c.
„ „ 2 hours	...	5 „ 500 „
„ „ 3 „	...	2 „ 200 „
„ „ 4 „	...	No colonies—Sterile.
„ „ 5 „	...	„ „
„ „ 6 „	...	„ „

Hydrogen-ion concentration—pH 6.8.

III. Lockwood Baths.

Water purified by filtration, four-hourly circulation, chlorination also employed. Free chlorine estimated at time of sampling 0.2 parts per million.

i. B. COLI PRESUMPTIVE TEST.

10 c.c.	...	...	Absent all tubes.
5 c.c.	...	...	„ „
1 c.c.	...	...	„ „

ii. ABSOLUTE NUMBER OF BACTERIA.
(Immediate examination.)

Colonies present on plate	...	24
„ per 1/100 c.c.	...	24
„ per 1 c.c.	...	2,400

iii. EFFICIENCY OF CHLORINATION AND PURIFICATION.

After standing 1 hour	...	10 colonies or 1,000 per c.c.
„ „ 2 hours	...	4 „ 400 „
„ „ 3 „	...	No colonies—Sterile.
„ „ 4 „	...	„ „
„ „ 5 „	...	„ „
„ „ 6 „	...	„ „

Hydrogen-ion concentration—pH 7.0 to pH 7.2.

IV. Ramsden Street Baths.

Water purified by filtration, four-hourly circulation, and by chlorination. Free chlorine estimated at time of sampling 0.5 parts per million.

i. B. COLI PRESUMPTIVE TEST.

10 c.c.	.....	Absent in all tubes.
5 c.c.	... ..	„ „
1 c.c.	... ..	„ „

ii. ABSOLUTE NUMBER OF BACTERIA.

(Immediate examination.)

Colonies present on plate	...	44
„ per 1/100 c.c.	...	44
„ per 1 c.c.	... ..	4,400

iii. EFFICIENCY OF CHLORINATION AND PURIFICATION.

After standing 1 hour	...	18 colonies or 1,800 per c.c.
„ „ 2 hours	...	14 „ 1,400 „
„ „ 3 „	...	9 „ 900 „
„ „ 4 „	...	No colonies—Sterile.
„ „ 5 „	...	„ „
„ „ 6 „	...	„ „

Hydrogen-ion concentration—pH 7.2 to pH 7.4.

The Cambridge Road Pools were sampled on 3rd August, 1937, at 10-45 a.m.

The Lockwood Pool was sampled on 5th August, 1937, at 10 a.m.

The Ramsden Street Pool was sampled on 5th August, 1937, at 11 a.m.

Definite smarting of the eyes was experienced following immersion in the Cambridge Road Pools ; this was absent in the case of the others.

(Signed)

G. A. W. NEILL, M.B., D.P.H.

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